

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90064 023 ***150.00

DOCUMENT # H58903

1. Corporation Name

MARTIN, WARD & MARTIN, INC.

Principal Place of Business

% ROBERT D. MARTIN
1801 S. NOVA RD.
SOUTH DAYTONA FL 32119-1733

Mailing Address

% ROBERT D. MARTIN
1801 S. NOVA RD.
SOUTH DAYTONA FL 32119-1733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1985

4. FEI Number

59-2528929

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 501 N. Grandview Ave

2a. Mailing Address

26 501 N. Grandview Ave

Suite, Apt. #, etc.

22 Suite 105

Suite, Apt. #, etc.

27 Suite 105

City & State

23 Daytona Beach, FL

City & State

28 Daytona Beach, FL

Zip Country

24 32118 25 US

Zip Country

29 32118 30 US

9. Name and Address of Current Registered Agent

MARTIN, ROBERT D.
SUNTRUST BUILDING, SUITE 105
501 N. GRANDVIEW AVENUE
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CEO ☐ DELETE

NAME MARTIN, ROBERT D.

STREET ADDRESS 1801 S. NOVA RD.

CITY-ST-ZIP S.DAYTONA FL

TITLE VTS ☐ DELETE

NAME MARTIN, RICHARD K.

STREET ADDRESS 1801 S. NOVA RD.

CITY-ST-ZIP S.DAYTONA FL

TITLE PD ☐ DELETE

NAME WARD, JOHN R.

STREET ADDRESS 1801 S. NOVA RD.

CITY-ST-ZIP S.DAYTONA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 501 N. Grandview Ave #105

1.4 CITY-ST-ZIP Daytona Beach, FL 32118

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 501 N. Grandview Ave #105

2.4 CITY-ST-ZIP Daytona Beach, FL 32118

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 501 N. Grandview Ave #105

3.4 CITY-ST-ZIP Daytona Beach, FL 32118

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert D. Martin

1/11/99

(904) 238-5577

Daytime Phone #

CR2E034 (11/98)