## 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

## DOCUMENT # H72180 1. Corporation Name

SPIRIT PRODUCTIONS, INC.

TEOMESIA

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

							MENT MENT MINE		
Principal Place	e of Business	Mailing Address							
CONCOURSE	DRIVE	6 CONCOURSE DRIVE							
PO BOX 3161		PO BOX 3161	PO BOX 3161			DO NOT WRITE IN THE CRACE			
EQUESTA FL 33469 TEQUESTA FL 33469				DO NOT WRITE IN THIS SPACE					
		•			3. Date incorporated or Q	ualited			
		·			08/19/1985				
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	÷		pplied For	
1		26			59-3039729		<del></del>	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Des	sired 🗌		Additional	
<u>a</u>		27			5. Certificate of Ctatos Box		Fee R	equired	
City & State	e	City & State	<del>-</del>		6. Election Campaign Fina	ancing	\$5.00	May Be	
3		28		•	Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Count	гу	8. This corporation owes t	he current year li	ntangible		
4	25	29	30		Personal Property Tax.		Yes	□No	
*	9. Name and Address of Curr		1991		10. Name and Address of	New Registered	d Agent		
<del></del>	9. Name and Address of Cutt	i k	8	1 Name	1.				
MAN	ITWILL, DAVID A.	17.	L	,		<del></del>			
SPORT	ONCOURSE DR	•	8	Street Add	Iress (P.O. Box Number is Not a	Acceptable)			
ם ס	BOX 3161		-	13	1 1 2 4 4 5 1 1 1 2 4 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 188. 14. 1. 1881. 1.188	1 (4 ) Fig. 2.	214 15 27 33	
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IEU	UESTA FL 33469	•		4 City	0 4 (4440) S	er tider de distablé de la	85 Zip	Code	
•	to the provisions of Sections 607.0			'		<u>                                      </u>			
SIGNATURE	• •	gations of, Section 607.0505.	, Florida Statut	<b>#5.</b>	ion's board of directors. I hereb	<u>,                                      </u>			
SIGNATURE	Signature, typed or printed name of registered a	gations of, Section 607.0000 agent and title if applicable.	, Florida Statut	<b>#5.</b>	od when reinstating): ADDITIONS/CHANGES	DATE			
SIGNATURE	Signature, typed or printed name of registered a OFFICERS	gations of, Section 607.0505.	NOTE: Registered A	gent signature require	ed when reinstating) : ADDITIONS/CHANGES	DATE		ORS IN 12	
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered a OFFICERS	gations of, Section 607,0305  agent and title if applicable. ((  AND DIRECTORS	NOTE: Registered A	gent signature requin	red when reinstating)	DATE	AND DIRECT	ORS IN 12	
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered a OFFICERS.  DPS MANTWILL, PAULINE T.	gations of, Section 607,0305  agent and title if applicable. ((  AND DIRECTORS	NOTE: Registered A  13.  1.1 TITL  1.2 NAM	gent signature requin	ed when reinstating) : ADDITIONS/CHANGES	DATE	AND DIRECT	ORS IN 12	
SIGNATURE  12.  TITLE .  NAME  STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS.  DPS MANTWILL, PAULINE T. 6 CONCOURSE DR	gations of, Section 607,0305  agent and title if applicable. ((  AND DIRECTORS	13. E 1.1 TITU 1.2 NAM 1.3 STR	gent signature requir	ed when reinstating) : ADDITIONS/CHANGES	DATE	AND DIRECT	ORS IN 12	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS.  DPS MANTWILL, PAULINE T. 6 CONCOURSE DR TEQUESTA FL	gations of, Section 607.0909  agent and title if applicable. (  AND DIRECTORS  DELETI	13. E 1.1 TITU 1.2 NAM 1.3 STR 1.4 CITY	gent signature require  E  E  E  E  E  E  T  T  T  T  T  T  T	ed when reinstating) : ADDITIONS/CHANGES	DATE	AND DIRECT	ORS IN 12	
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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 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 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 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 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 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 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 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 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 supplied with the information indicated on this annual report or supplied with the information indicated on the information indicated on

**FILED** 

Feb 01, 1999 8:00am

**Secretary of State** 

02-01-1999 90010 004 \*\*\*150.00