05-10-1999 90135 047 \*\*\*150.00

## 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 # H72512

1. Corporation Name

DISCOVERY PROPERTIES, INC.

Principal Place of Business 1958-B BAYSHORE BLVD		Mailing Address  G. PENFIELD JENNINGS							
DUNEDIN FL 34698 US		1960 BAYSHORE BLVD DUNEDIN FL 34698			DO NOT WRITE	IN THIS	SPACE		
US		DONEDIN TE 34030				3. Date Incorporated or Qualifed 08/22/1985			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26			[	59-2597957		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27			J. Certifolite of Citation Desires		Fee R	equired	
City & State		City & State		ŀ	6. Election Campaign Financing			Мау Ве	
23		28	Country			Trust Fund Contribution			to Fees
Zip	Country	Zip	Country			<ol><li>This corporation owes the curren Personal Property Tax.</li></ol>	t year Inta	ingible □ Yes	□No
24	9. Name and Address of Current		30		<del></del>	10. Name and Address of New Re	gistered /		
	9. Name and Abdress of Current	Registered Agent	81	Name		10. Halle alla year. ood of Hew Ha	<u> </u>		
JEN	NINGS, G. PENFIELD								
1960	BAYSHORE BLVD		82	Street	t Address	s (P.O. Box Number is Not Acceptable	e)		
DUN	EDIN FL 34698		83				<del></del>		
			84	City			FL	85 Zip	Code
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligation	of Florida. Such change was au	uthorized by	the corp	d corpora poration's	ation submits this statement for the push board of directors. I hereby accept to	irpose of o the appoin	changing its itment as re	s registered egistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agen	nt signatura	a required wh		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	CERS AN		
TITLE	DPS	DELETE	1.1 TITLE					☐ Change	☐ Addition
NAME	Littlejohn, susan s 1 <del>25 Edgewater d</del> r. /6/ 1	FINEINA AUR.	1,2 NAME		1				l
STREET ADDRESS	125 EUGEWAILH UH.	- ZUK. 170	1.3 STREET	T ADDRESS	s				(
CITY-ST-ZIP	DUNEDIN FL 34698	[] profess	1,4 CITY-S	T-ZIP				Change	Addition
TITLE		☐ DELETE		2.1 TITLE				□ Citalige	
NAME			2.2 NAME	_					
STREET ADDRESS			2.3 STREET		s				
CITY-ST-ZIP		☐ DELETE	2.4 CITY-S 3.1 TITLE	iT-ZIP	+			☐ Change	Addition
TITLE		U DELL'IL			1			onango	
NAME			3.2 NAME	TADDDECE					Ţ
STREET ADDRESS			3.3 STREET		١,				
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S	11-ZIP	+			Change	Addition
TITLE			4,2 NAME						_
NAME express adoption				T ADDRESS					:
STREET ADDRESS			4.4 CITY-S		٦				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	1-21	+			Change	☐ Addition
NAME		<u></u>	5.2 NAME						
STREET ADDRESS			5.3 STREE	TADDRESS	s				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	6.1 TITLE		_			☐ Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	TADDRESS	s				

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. SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR