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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # .106542

Principal Place)AD		KINS LANE						
JACKSONVILLE FL 32226 JACKSONVILLE FL 32218 US						DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed 03/28/1986		
2. Principal P	lace of Business	2a, Mailir	ng Address				4. FEI Number	A	pplied For
21		26	•				59-2653831	N	ot Applicable
	#, etc	Suite,	,.Apt#,.etc				5. Certificate of Status Desired	V = - · · ·	Additional
22		27					5. Certificate bi diatus besired	Fee R	lequired
City & Stat	e	City 8	& State				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip		Count	try		8. This corporation owes the current y	ear Intangible	
24	25	29		30			Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered	Agent		31 N		10. Name and Address of New Regis	stered Agent	
HASKINS, KATHRYN H. 1845 HASKINS LANE JACKSONVILLE FL 32218				32 S					
				8	34 C	City		85 Zip	Code
office or r	ragistared agent or both in the State	of Florida Suc	rh chande was a	iuthonzed h	ove-na	amod corne	oration submits this statement for the purp n's board of directors. I hereby accept the	ose of changing its appointment as n	s registered egistered
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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.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS