PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J12896

GLEN GARRY ENTERPRISES, INC.

Principal Place of Business Mailing Address								- 	I) illia illia Ain afa	31 618 11 6 1813))	
1914 BEACHWAY RD. 1914 BEACHWAY RD.													
SUITE 3-0 SUITE 3-0									or worre it! Ti	UO 00 40	_		
JACKSONVILLE FL 32207-2352 JACKSONVILLE FL 32207-2352								DO NOT WRITE IN THIS SPACE					
us us								3. Date Incorporated or Qualifed					
								05/06/1986	<u> </u>		T 4	tind For	
2. Principal Place of Business 2a. Mailing Address								4. FEI Number		<u> </u>	_ 	hied For	
21			26					59-2872059		60		Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status De	sired 🔲	\$8.75 Additional Fee Required			
22			City & State									<u></u>	
City & State								6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country			Zip Country									71000	
Zip	 1	⊢	¬ '					8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes 📉 No					
24	9. Name and Address of Curre	29 nt Pegiste	red Agent	301				10. Name and Address of				7	
	9. Name and Address of Curre	iit ixegiste	nea Agent		81	Name		10.					
SHO	DATH, RICHARD H.												
1914			82	Stree	t Addre	ss (P.O. Box Number is Not	Acceptable)			3			
	E 30												
	(SONVILLE FL 32207												
U.C.	(OOTTILLE I E OLLO)				84	City				EL 85	Zip C	ode	
	to the provisions of Sections 607.056	00 1 00	7 1EOP Elorido Statut	oc the e	hove) name	d corpo	ration submite this statemen			na its i	registered	
office or re	egistered agent, or both, in the State	of Florida	. Such change was a	utnonzed	DV	tne cor	poration	n's board of directors. I herel	by accept the ap	pointment	as reg	istered	
agent. I ar	m familiar with, and accept the obliga	ations of, S	Section 607.0505, Flo	rida Stati	utes.								
SIGNATURE				Daniet and			Jacob	when reinstating)	DATE			\	
						it signature	required	ADDITIONS/CHANGES			ECTO!	RS IN 12	
12.	DP OF TOLKS A	AD DIVEC	☐ DELETE	13.	ΠF		T	ADDITIONO/OF BUILDED	10 011104	□ CH		Addition	
l	SUDDATH, RICHARD H.			1.2 N/						-	-	Į	
					1.3 STREET ADDRESS								
STREET ADDRESS 1914 BEACH WAY ROAD, STE 3-0					1.4 CITY-ST-ZIP								
CITY-ST-ZIP	JACKSONVILLE FL		[] DELETE	2.1 T		1-218	+-			ПСН	ange	Addition	
TITLE	STD	DECETE	1	2.2 NAME							_		
NAME	SUDDATH, JULIA ANNE			2.2 NAME 2.3 STREET ADDRE				•				i	
STREET ADDRESS	1251 GLENGARRY RD.						١,	₩ .		-			
CITY-ST-ZIP	JACKSONVILLE FL		☐ DELETE	2.4 C		ST-ZIP	+-	<u> </u>		Ch	ange	Addition	
TITLE	VD '		C) DELETE	1							g-		
NAME	RANNE, MICHAEL D	• •		3.2 N/			.					\	
STREET ADDRESS	1914 BEACHWAY ROAD, STE	3-0				TADORES	S '					Į	
CITY-ST-ZIP	JACKSONVILLE FL		□ DELETE			T-ZIP				□ Ch	2000	Addition	
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NAME				4.2 N								1	
STREET ADDRESS						ADDRES	5					\	
CITY-ST-ZIP				4.4 CI		T-ZIP	┼─			Ch	20000	Addition	
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CITY-ST-ZIP				5.4 CI 6.1 TI		I+ZIP	┼		· · · · · · · · · · · · · · · · · · ·			Addition	
TITLE .	ـ مدمري		☐ DELETE							□ CH	anye		
NAME .				6.2 N			[[
STREET ADDRESS	'			6.3 \$	REE	T ADDRES	S						

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

SIGNATURE

CITY-ST-ZIP

904 399 15<u>5</u>53

FILED

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90025 023 ***150.00