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 # 1. Corporation Name	J197	'61
MARTY LITTLE ASSO	CIATES,	INC.

Principal Place of Business				
% MARTIN V.C. LITTLE				
888 NORTH FIG TREE LANE				
DIANTATION EL 33317				

Mailing Address

FILED Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90020 035 ***150.00



% MARTIN V 888 NORTH PLANTATION	FIG TREE LANE	% MARTIN V.C. LITTLE 888 NORTH FIG TREE LANE PLANTATION FL 33317			DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS S	PACE		
					06/17/1986				
2. Principa	Place of Business	2a. Mailing Address		-	4. FEI Number			App	lied For
21		26			59-2698972			Not	Applicable
	pt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired				dditional quired
City & S	State	City & State	-		Election Campaign Financing Trust Fund Contribution				May Be Fees
Zip	Country 25		Country		This corporation owes the current year Personal Property Tax.		ngible		K No
24	9. Name and Address of Curr				10. Name and Address of New Register	ed A	gent		
	5. Haille alia Address of Cult	ent negistered Agent	81	Name	,,,				
	TTLE, MARTIN V.C. 38 FIG TREE LANE		82	Street /	Address (P.O. Box Number is Not Acceptable)				
	LANTATION FL 33317		83						
			84	City			85	Zip C	ođe
office o	or registered agent, or both, in the Sta I am familiar with, and accept the obli RE	te of Florida. Such change was author gations of, Section 607.0505, Florida S	zed by Statutes	tne corpo	corporation submits this statement for the purposi- poration's board of directors. I hereby accept the ap-	ропп	ment	as reg	istered
	Signature, typed or printed name of registered a			signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		DIDE	CTO	20 IN 12
12.			13.		ADDITIONS/CHANGES TO OFFICERS	AINL	Cha		Addition
TITLE	PTD		.1 TITLE						
NAME	LITTLE, MARTIN V.C.		.2 NAME						1
STREET ADDRE	l .	1	.3 STREET	ADDRESS					1
CITY-ST-ZIP	PLANTATION FL		.4 CITY-S	r-ZIP					
TITLE	SD	☐ DELETE 2	,1 TITLE				Ch:	ange	☐ Addition
NAME	LITTLE, JANET L.	2	.2 NAME						
STREET ADORE	ESS 888 N. FIG TREE LANE	2	3 STREET	ADDRESS					Į
CITY-ST-ZIP	PLANTATION FL		. 4 CITY- S	T-ZIP					
TITLE		☐ DELETE 3	1 TITLE				☐ Ch	ange	Addition
NAME			.2 NAME						
STREET ADDRE	ESS		.3 STREE	ADDRESS					
CITY-ST-ZIP		3	.4. CITY-S	T-ZIP					
TITLE		☐ DELETE 4	.1 TITLE				Ch	ange	Addition
NAME			. 2 NAME						
STREET ADDRE	FSS		.3 STREE	ADDRESS					
CITY-ST-ZIP		4	4 CITY-S	r-ZIP					
TITLE			.1 TITLE	-			Ch	ange	Addition
NAME			.2 NAME						
STREET ADDRI	E00			ADDRESS					
	E33		4 CITY-S						
CITY-ST-ZIP			5.1 TITLE				☐ Ch	ange	☐ Addition
			2 NAME				_	-	_
NAME				T ADDRESS					

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 of on an attachment with an address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

954-973-2477