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Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90050 014 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J20307

1. Corporation Name

THE BRYANT SKINNER COMPANY

Principal Place of Business
2970 HARTLEY RD
STE 302
JACKSONVILLE FL 32257-6245
US

Mailing Address
2970 HARTLEY RD
STE 302
JACKSONVILLE FL 32257-6245
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1986

4. FEI Number

59-2690859

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Rt 2 Box 1429

Suite, Apt. #, etc.

22 City & State

23 Crescent City, FL

Zip Country

24 32112 25 US

2a. Mailing Address

26 Rt 2, Box 1429

Suite, Apt. #, etc.

27 City & State

28 Crescent City, FL

Zip Country

29 32112 30 US

9. Name and Address of Current Registered Agent

SKINNER, BRYANT B
2970 HARTLEY RD
STE 302
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

81 Name

Skinner, Bryant B. Sr.

82 Street Address (P.O. Box Number is Not Acceptable)

Rt 2 Box 1429 2 Mi So Crescent City

83 on US 17

84 City Crescent City

FL

85 Zip Code 32112

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* President 3-16-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SKINNER, BRYANT B.
STREET ADDRESS 2970 HARTLEY RD #302
CITY-ST-ZIP JACKSONVILLE FL

TITLE VP ☐ DELETE

NAME SKINNER, CHARLES W.
STREET ADDRESS 2970 HARTLEY RD #302
CITY-ST-ZIP JACKSONVILLE FL

TITLE S ☐ DELETE

NAME DELONG, DORITA
STREET ADDRESS 2970 HARTLEY RD #302
CITY-ST-ZIP JACKSONVILLE FL

TITLE T ☐ DELETE

NAME SKINNER, RUSSELL R
STREET ADDRESS 2970 HARTLEY RD #302
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Skinner Sr., Bryant B.
1.3 STREET ADDRESS Rt 2 Box 1429
1.4 CITY-ST-ZIP Crescent City, FL 32112

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
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 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.

SIGNATURE: *[Signature]* 3-16-99 904-698-1979

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (11/98)