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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90011 043 ***150.00

DOCUMENT # J25633

1. Corporation Name

ALPERT, BARKER & RODEMS, P.A.

Principal Place of Business	Mailing Address		1 100110 0110 11001 21110 61106 11183 1111 0	HAND NORTH MINNE MENDEN MINNE BINNI EBNI
% JONATHAN L. ALPERT	% Jonathan L. Alpert			
100 SOUTH ASHLEY DR., SUITE 2000	100 SOUTH ASHLEY DR., S	SUITE 2000	BO NOT WOITE IN	THE PRACE
TAMPA FL 33602	TAMPA FL 33602		DO NOT WRITE IN T 3. Date Incorporated or Qualifed	MIS SPACE
			07/21/1986	
2. Principal Place of Business	2a, Mailing Address		4, FEI Number	Applied For
21	26		59-2688799	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	ır Intangible ∭∑Yes □No
24 25 9. Name and Address of C		30	Personal Property Tax. 10. Name and Address of New Registe	<u> </u>
5. Name and Address of C	Auton Registered Agent	81 Name	10,. 1141113 4114 1144133 3. 11441 11441	
Alpert, Jonathan L.			(200	
100 SOUTH ASHLEY DR		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 2000		83		
TAMPA FL 33602				
		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 60	7.0502 and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the purpos	e of changing its registered
agent. I am familiar with, and accept the	State of Florida. Such change was au obligations of, Section 607.0505, Flori	ithorized by the corporat ida Statutes.	ion's board of directors. I hereby accept the a	ppomiment as registered
SIGNATURE				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ri		Registered Agent signature requir	A LA AMERICA DE LA CALLACTA DEL CALLACTA DEL CALLACTA DE LA CALLAC	
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
''		1.5 11102		Change Change
NAME ALPERT, JONATHAN L.		12 NAME		
STREET APODESS 100 C A CHI EV DDIVE CI	_	1.2 NAME		
STREET ADDRESS 100 S. ASHLEY DRIVE SU	_	1.3 STREET ADDRESS		
CITY-ST-ZIP TAMPA FL	_			☐ Change ☐ Addition
CITY-ST-ZIP TAMPA FL TITLE VD	JITE 2000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TAMPA FL TITLE VD NAME BARKER, CHRIS A.	JITE 2000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
CITY-ST-ZIP TAMPA FL TITLE VD NAME BARKER, CHRIS A.	JITE 2000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	and the second s	_ Change
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CITY-ST-ZIP TAMPA FL TITLE VD NAME BARKER, CHRIS A. STREET ADDRESS CITY-ST-ZIP TAMPA FL TITLE SD NAME CALCUTT, PATRICK B.	DITE 2000 DELETE E 2000 XIX DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP TAMPA FL TITLE VD NAME BARKER, CHRIS A. STREET ADDRESS CITY-ST-ZIP TAMPA FL TITLE SD CALCUTT, PATRICK B. STREET ADDRESS CITY-ST-ZIP TAMPA FL TITLE TD	DITE 2000 DELETE E 2000 XIX DELETE 000 DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		
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CITY-ST-ZIP TAMPA FL TITLE NAME BÄRKER, CHRIS A. 100 S ASHLEY DRIVE STI TAMPA FL TITLE SD NAME CALCUTT, PATRICK B. STREET ADORESS CITY-ST-ZIP TAMPA FL TITLE TD NAME STREET ADORESS CITY-ST-ZIP TAMPA FL TTD RODEMS, R. CHRISTOPH 100 S ASHLEY DR, STE 2 TAMPA FL TITLE NAME NAME	DITE 2000 DELETE E 2000 XIX DELETE 0000 DELETE ER 2000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	Perrentino, David D.	☐ Change ☐ Addition ☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP TAMPA FL TITLE NAME BÄRKER, CHRIS A. STREET ADDRESS CITY-ST-ZIP TAMPA FL TITLE NAME CALCUTT, PATRICK B. 100 S ASHLEY DRIVE #2 TAMPA FL TITLE TO RODEMS, R. CHRISTOPH 100 S ASHLEY DR, STE 2 TAMPA FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TAMPA FL	DITE 2000 DELETE E 2000 XIX DELETE 0000 DELETE ER 2000	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 1	Ferrentino, David D. 100 S. Ashley Dr., Su	☐ Change ☐ Addition ☐ Change ☐ Addition ☐ Change ☐ Addition
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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 angual 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 receiveryor 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR

(813) 223-4131

100 S. Ashley Dr., Suite 2000