Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90093 029 ***150.00

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

DOOLINAENT

1. Corporation	TERPRISES OF BREVARD, I	NC.										
Principal Place of Business Mailing Address												., ., ., ., ., .,
3964 HUNTERS RIDGE WAY TITUSVILLE FL 32796 3964 HUNTERS RIDGE WAY TITUSVILLE FL 32796 TITUSVILLE FL 32796									DO NOT WRITE	IN THIS SPACE		
US		US						3.	Date Incorporated or Qualifed 07/24/1986			
2 Principal P	lace of Business	2a.	Mailing Address					4.	FEI Number		Appl	ied For
2. Tillicipal t	idae di Eddinicae	26	.						59-2700157		Not	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.							\$8.7	5 Ad	ditional
22			27					5.	Certifcate of Status Desired	Fee	Req	uired
City & Stat	e		City & State				·	6.	Election Campaign Financing	\$5.	00 N	lay Be
23		28						ļ	Trust Fund Contribution	Add	led to	Fees
Zip	Country	-	Zip		Country			8.	This corporation owes the curren	t year Intangible	_]No
24	25	29		30	r			40	Personal Property Tax. Name and Address of New Reg	<u> </u>		3140
	9. Name and Address of Curren	t Regist	ered Agent		81	Na	me	10.	Name and Address of New Re	disteled whell		
WIH	JAMS, JEFFERY M					,,,,						·
3964 HUNTERS RIDGE WAY					82 Street Add			ss (F	P.O. Box Number is Not Acceptable	e)		.
TITUSVILLE FL 32796						-						
	0 VILLE 1 E 021 00				83							
					84	Cit	у			FL 85	Zip Co	ode
	to the provisions of Sections 607.050.	0 - 10	07.4500 Florida	Ct-t-t-a th			and corpo	ratio	n cubmits this statement for the nu		a its re	enistered
office or r	registered agent, or both, in the State :	of Florid:	la. Such change v	was authori	zed by	the c	corporation	n's b	oard of directors. I hereby accept t	he appointment a	s regi	stered
agent. I a	m familiar with, and accept the obligation	tions of,	Section 607.050	5, Florida S	tatutes	i.						
SIGNATURE				(NOTE: Regist		6 -1			instating)	DATE		
	Signature, typed or printed name of registered agen OFFICERS AN				erea Agen 3.	it signa	ture required		ADDITIONS/CHANGES TO OFFIC		CTOR	S IN 12
TITLE	D OFFICERS AN	D DIKE	DELE"		1 TITLE				7.00 TO 01.1.1.1020 10 0.1.1.1	☐ Chai		Addition
	WILLIAMS, JEFFERY M		_		2 NAME							
NAME	3964 HUNTERS RIDGE WAY		1.3 STREET ADDRESS			ESS						
STREET ADDRESS	TITUSVILLE FL				1.4 CITY-ST-ZIP							Ì
CITY-ST-ZIP	/S DELETE				2.1 TITLE					☐ Cha	nge	Addition
TITLE	WILLIAMS, MARLENE K.	-				2.2 NAME				_		
NAME	3964 HUNTERS RIDGE WAY				3 STREET	T ADDS	ecc					
STREET ADDRESS	-TITUSVILLE-FL				. 4 City-s							
TITLE			□ DELE		1 TITLE	11-21	- -			☐ Cha	nge	☐ Addition
NAME					2 NAME							
STREET ADDRESS					3 STREET	T ADDR	RESS					}
CITY-ST-ZIP					4. CITY-S							
TITLE			☐ DELE		.1 TITLE	,				☐ Cha	nge	☐ Addition
NAME				4	. 2 NAME		Ì					
STREET ADDRESS					3 STREET		ESS					
CITY-ST-ZIP					.4 CITY-S							
TITLE			☐ DELE		,1 TITLE					☐ Cha	nge	☐ Addition
NAME				5	2 NAME							
STREET ADDRESS				5	3 STREET	T ADDF	RESS					}
CITY-ST-ZIP				5	4 CITY-S	T-ZIP						
TITLE			☐ DELE	TE 6	.1 TITLE					☐ Cha	nge	☐ Addition
NAME				6	.2 NAME							
OTDEET ADDDEES				1 6	3 STREE	T ADDF	RESS					

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:

STREET ADDRESS