May 07, 1999 8:00 am Secretary of State

05-07-1999 90086 019 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

% DAVID W. WILCOX

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J57502

1. Corporation Name

Principal Place of Business % DAVID W. WILCOX

PLATINUM PROPERTIES, INC.

308-13TH STREET WEST BRADENTON FL 34205		308-13TH STREET WEST BRADENTON FL 34205		DO NOT WRITE IN THIS SPACE				
					 Date Incorporated or Qualified 02/13/1987 			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26	26		59-2773664		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0)0 May Be	
23		28	8		Trust Fund Contribution	Add	ed to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible			
24	25	29 3	0		Personal Property Tax. Yes No			
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
16/11 (NOV DAMP W		81	Name				
	COX, DAVID W. 13TH STREET WEST		82	Street Ad	eet Address (P.O. Box Number is Not Acceptable)			
	DENTON FL 34205		83					
			84	City			Tip Code	
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	horized by	the corpora	orporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing appointment as	s registered	
CICITATIONE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	Registered Ager	nt signature requ		ATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	DP	☐ DELETE	1.1 TITLE			☐ Chan	ge ☐ Addition	
NAME	Forsythe, Peter		1.2 NAME					
STREET ADDRESS	308-13TH STREET WEST		1.3 STREET	ADDRESS			ľ	
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-S	T-ZIP				
TITLE	SDT	☐ DELETE	2.1 TITLE			Chan	ge 🗌 Addition	
NAME	Forsythe, alisabethe J.	RSYTHE, ALISABETHE J. 22N		ļ			l	
STREET ADDRESS	ss 308 13 ST WEST 235		2.3 STREE	TADDRESS			Ì	
CITY-ST-ZIP	BRADENTON FL 2.40		2. 4 CITY- 9	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE			☐ Chan	ge 🗌 Addition	
NAME			3.2 NAME				ļ	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	<u> </u>		34, CITY-5	ST-ZIP				
TITLE	☐ DELETE 4.1 TI		4.1 TITLE			Chan	ge 🗌 Addition	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREE	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE	.]		Chan	ge 🗌 Addition	
NAME			52 NAME					
STREET ADDRESS			4	T ADDRESS			ĺ	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE	ĺ		Chan	ge 🗌 Addition	
NAME			6.2 NAME				}	
			■ 6.3 STREE	TADORESS I			I	

14. I hereby certify that the information supplied with this filing does not qualify for the exception 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 of 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

CITY-ST-ZIP

IGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR