

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # J80661

1. Corporation Name  
ROBERT A. SEXTON, INC.

Principal Place of Business

Mailing Address

P.O. BOX 410057  
MELBOURNE FL 32941-0057

P.O. BOX 410057  
MELBOURNE FL 32941-0057

FILED

99 AUG 18 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1987

4. FEI Number

59-2835275

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.

☒ Yes ☐ No

2. Principal Place of Business  
21 PO BOX 410105  
Suite, Apt. #, etc.  
22 MELBOURNE FL  
City & State  
23 32941-0105  
Zip Country  
24 25

2a. Mailing Address  
26 PO BOX 410105  
Suite, Apt. #, etc.  
27 MELBOURNE FL  
City & State  
28 32941-0105  
Zip Country  
29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEXTON, PATSY J.  
7285 WAELTI DRIVE  
SUITE 800  
MELBOURNE FL 32940

81 Name

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

83

84 City

FL

85

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVP  
NAME SEXTON, ROBERT A.  
STREET ADDRESS 3125 ASPINWALL AVE.  
CITY-ST-ZIP ROCKLEDGE FL

TITLE APD  
NAME SEXTON, ROBERT A.  
STREET ADDRESS 3125 ASPENDWALL AVE  
CITY-ST-ZIP ROCKLEDGE FL

TITLE TS  
NAME SEXTON, DAVID S.  
STREET ADDRESS 930 DAYWAY  
CITY-ST-ZIP MELBOURNE FL

TITLE T  
NAME SEXTON, DAVID S.  
STREET ADDRESS 930 DAYWAY  
CITY-ST-ZIP MELBOURNE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
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  
5.4 CITY-ST-ZIP

6.1 TITLE  
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-28-99

(407) 254-2736

Date

Daytime Phone #

CR2E034 (5/99)

## Arno Financial Services, Inc.

Accounting • Tax • Financial Services

115 Hickory Street • Suite 202 • West Melbourne, Florida 32904  
(407) 951-2888 • Fax (407) 768-7589

### Andrew P. Arno

Enrolled to Represent Taxpayers before the IRS  
Accredited Tax Advisor  
Member of Florida Society of Accounting & Tax Professionals  
Member of National Society of Accountants



### Tamara L. Cheek

Enrolled to Represent Taxpayers before the IRS  
Member of Florida Society of Accounting & Tax Professionals

August 2, 1999

Division of Corporations  
Annual Reports Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Robert A. Sexton, Inc.  
PO Box 410105  
Melbourne, FL 32941-0105  
Document # J80661

Attached is the annual report for the above mentioned corporation along with a check for \$150 for the annual fee. The taxpayer apologizes for the report being filed late, this was not intentionally or without regard for the law. When the report was due the taxpayer was out of state caring for their parent who was deathly ill at the time. The taxpayer did not realize the report was not filed until they received a second notice.

We ask that you accept the check and annual report as filed and waive the penalty for the above mentioned reasons. The taxpayer did not intentionally or without regard fail to pay and file the report timely, we feel this is reasonable cause. Thank you for your cooperation in this matter.

Respectfully,

Andrew P. Arno, E.A., A.T.A.  
Arno Financial Services, Inc.

**HD VEST**  
FINANCIAL SERVICES

Andrew P. Arno, Registered Representative  
Securities offered through H.D. Vest Investment Securities, Inc. Member:  
6333 North State Hwy 161, Fourth Floor • Irving, TX 75038 • (972) 863-6000