PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K06275

1. Corporation Name

SMITH, RILEY & DEMPSEY, P.A.

Mailing Address Principal Place of Business

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90069 030 ***150.00



| 120 E.GEORGIA AVENUE 120 E.GEORGIA AVENUE P.O.BOX 638 P.O.BOX 638 | | | | | | | | | |
|---|---|--|-------------------------------|--|--|---|-----------|------------|--|
| P.O.BOX 638 P.O.BOX 638 P.O.BOX 638 DELAND FL 32721-7638 | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| DECKID I L OF | 21 7000 | | • | | 3. Date Incorporated or Qualifed 12/10/1987 | ***** | | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | ***** | 4. FEI Number | | App | lied For | |
| 26 | | | | | 59-2856446 | | Not | Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | | |
| 22 27 City & State City & State | | | | | 6 Floring Compaign Financing | ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` | 5.00 | | |
| City & State | e | ⊢ ′ | | | 6. Election Campaign Financing Trust Fund Contribution | } 1 T | Added to | . , | |
| 23 | | Zip | Country | | | | | 71000 | |
| Zip | Country | | | | 8. This corporation owes the current year Intangible Personal Property Tax. | | | | |
| 9. Name and Address of Current Registered Agent | | | 30 | 10. Name and Address of New Registered Agent | | | | | |
| | 9. Name and Address of Current | Registered Agent | 81 | Name | 10. Name and Address of Now A | agistoro rigori | <u></u> | | |
| DALA | METTO CHARTER SERVICES INC. | | " | Name | | | | | |
| 150 MAGNOLIA AVENUE | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | | | | |
| DAY | TONA BEACH FL 32015 | | 83 | | | | | | |
| | | | . 84 | ' ' | | FL 85 | | | |
| office or r | egistered agent, or both, in the State on mailing with, and accept the obligation | of Florida. Such change was at ons of, Section 607.0505, Flor | utnorized by rida Statutes | the corporati | poration submits this statement for the poor's board of directors. I hereby accept | t the appointmen | nt as reg | ustered | |
| | Signature, typed or printed name of registered agent | | | nt signature require | ed When reinstating) | DATE | · | 20.11.40 | |
| 12. | OFFICERS ANI | | 13. | | ADDITIONS/CHANGES TO OFF | | | RS IN 12 | |
| TITLE | PD | ☐ DELETE | 1.1 TITLE | ļ | | | Change | Additio | |
| NAME | Smith, Jeffrey T. | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 120 EAST GEORGIA AVENUE | | 1.3 STREE | T ADDRESS | | | | | |
| ÇITY-ST-ZIP | DELAND FL | | 1,4 CITY-5 | IT-ZIP | | | | | |
| TITLE | STD | ☐ DELETE | 2.1 TITLE | | | | Change | Additio | |
| NAME | RILEY, CHARLES E. | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 120 EAST GEORGIA AVENUE | | 2.3 STREE | T ADDRESS | • | | | | |
| - | DELAND FL | | 2. 4 CITY- | | | | | | |
| CITY-ST-ZIP | VT | □ DELETE | 3,1 TITLE | J1-ZIF - | | | Change | Additio | |
| | RILEY, CHARLES E. | <u> </u> | 3.2 NAME | | | | | | |
| NAME | 120 EAST GEORGIA AVENUE | | | TADDRESS | | | | | |
| STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | DELAND FL | ☐ DELETE | 3.4. CITY- 4.1 TITLE | \$1-ZIP | | | Change | Additio | |
| TITLE | VSD DOWN D. D. | ☐ pereie | | Ì | | J | | | |
| NAME | DEMPSEY, DONALD B. | | 4. 2 NAME | ì | | | | | |
| STREET ADDRESS | 11 | | | TADDRESS | | | | | |
| CITY-ST-ZIP | DELAND FL | | 4.4 CITY- | ST-ZIP | | | Choras | ☐ Additio | |
| TITLE | | ☐ DELETE | 5.1 TITLE | İ | | U. | Change | ☐ Madage | |
| NAME | | | 5.2 NAME | | | | | ٠ | |
| STREET ADDRESS | | | 5.3 STREE | TADDRESS | | | | | |
| CITY-\$T-ZiP | | | 5.4 CITY- | ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | | Change | ☐ Additio | |
| NAME | | | 6.2 NAME | Į | • | | | | |
| STREET ADDRESS | | | 6.3 STREE | TADORESS | | | | | |
| OTTLET AUDICOS | to at the light to the light of the light | | 6.4 C/TY-5 | T-73P | | | | | |

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: