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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

## DOCUMENT #

1. Corporation Name

NATIONAL EXEMPTION SERVICE, INC.

## Apr 14, 1999 8:00 am Secretary of State **DIVISION OF CORPORATIONS** 04-14-1999 90066 042 \*\*\*150.00

1 12 12 12 12 12 12 12 12 12 12 12 12 12	

						<del></del>				
Principal Plac	e of Business	Mailing Address								
10810 - 72nd St. N. P.O. BOX 881										
	ite #207 Pinellas Park, FL 33780			3780	DO NOT WRITE IN THIS SPACE					
Largo, FL. 33777-1524			,	-	,, ,,	3. Date Incorporated or Qualifed				_1
,	22. 30, 23					5-17-1988				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For				┪.
21		26				59-2908281			Not Applicable	=
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						\$8.7	5 Additional	7
22	27					5. Certifcate of Status Desired			Required	
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be				Ξ}
23		28				Trust Fund Contribution Added to Fees				
Ζίρ	Country	Zip				8. This corporation owes the curre	ent year Inta	ngible		
24	25	29	29 30			Personal Property Tax.		Yes	□No	_
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered A	gent		_
				81	Name					ļ
	, JAMES A.			82	Street Addres	ss (P.O. Box Number is Not Accepta	ble)			7
	EVELAND ST.									_
SUITE				83						-
Clearw	ater, FL. 34615			84	City			85 Z	ip Code	┪
							<u>_FL_</u>	-	.p =	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute	s, the al	DOVE	-named corpor	ration submits this statement for the party acres	purpose of c	hanging	its registered	1
agent. I a	m familiar with, and accept the obligation	ns of, Section 607.0505, Flori	da Stati	ites.	ne corporation	a board of directors. Thereby decep	тис аррони	incirc da	1091010100	
SIGNATURE										-
	Signature, typed or printed name of registered agent a	<del></del>	<u> </u>	Agent	signature required v		DATE	DIDEO	TODO 111 40	<b>⊣</b> ໘
12.	OFFICERS AND	DELETE	13.	2.5		ADDITIONS/CHANGES TO OFF	-ICERS AND	Chan		<u>,   }</u>
TITLE D	D	□ Acreie	1.1 TIT		ļ			[] Criain	ie 🗆 voorie	"  3
NAME	BAKER, GERALD P.	1.2 NA								हे
STREET ADDRESS	10810 - 72nd St. N.	Suite #20/			ADDRESS					Į į
CITY-ST-ZIP	Largo, FL. 33777-15	DELETE	1.4 CITY-ST		-ZIP			r Chan	ge	늬 5
TITLE		Li VELETE	2.1 TITLE					Chan	de □ voquic	"  `
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREE		ADDRESS					1
CITY-ST-ZIP		2.40			-ZIP			<u></u>		
TITLE	, , , , , , , , , , , , , , , , , , ,	DELETE	3.1 TH					[_] Chang	je[-] Additio	13:1
NAME			3.2 NA	ME	}					1
STREET ADDRESS			3.3 ST	REET A	ADDRESS					1
CITY-ST-ZIP	·	-, <u></u>	3.4. CI		-ZIP					4
TITLE		☐ DELETE	4,1 TIT	ΣE	)			Chan	ge 🔲 Additio	n)
NAME .			4, 2 N	ME.						
STREET ADDRESS			4.3 STREE		ADDRESS					Į
C/TY-ST-ZIP			4.4 CITY-		ZIP					4
TITLE		☐ DEĻĒTE	5.1 TITLE					Chang	je 🔲 Additio	n /
NAME			5.2 NAME							-
STREET ADDRESS			5.3 STREE		1					
CITY-ST-ZIP			5.4 CIT		ZIP					4
TITLE		☐ DELETE	6.1 TIT		}			Chang	e 🗌 Additio	٦
NAME			6.2 NA	ME						
STREET ADDRESS	$\sim$				ADDRESS					
CITY-ST-ZIP	V —		6.4 CIT	Y-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 of changed on an alachment with an address, with all other tike empowered.

Gerald P. Baker

Director

3-17-99

(727) 546-8848

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR