## 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** 

## **DOCUMENT # K49855**

DOUGLAS CHARLES APPLE, INC.

Principal Plac	ce of Business	Mailing A	ddress				1 10 8 10 11 11 11 11	110 1818) 1818) BISBŞ BISI BIS	III 81011 BIBII DIBII 1	ALIKI DIBII IRBI
1251 ROYAL C DUNEDIN FL 3	DAK DR.	_	AL OAK DR.				-			
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							<ol> <li>Date Incorporated</li> <li>12/07/1988</li> </ol>	or Qualifed		
2. Principal F	Place of Business	2a. Mailin	g Address				4. FEI Number		Ap	oplied For
21	<del></del>	26	<del> </del>				<u>59-2940469</u>	<del></del>		ot Applicable
Suite, Apt. #, etc.		27	<del></del>				5. Certifcate of Statu	s Desired	\$8.75 / Fee Re	Additional equired
City & State		City 8	City & State				6. Election Campaig	n Financing	\$5.00	May Be
23	<u></u>	28	· · · · · · · · · · · · · · · · · · ·		<u> </u>	· -	Trust Fund Contri	bution	Added	to Fees
Zįp	Country	Zip			untry	.	8. This corporation of	• •		
24	25 25 Address of C	29	<b></b>	30	· 	!	Personal Property		Yes	□No
	9. Name and Address of C	<del></del>	-tgent		81 Nan	10	10. Name and Addre	SS Of New Register	au Agent	-
APP	LE DOUGLAS C									· ·
100125	1 ROYAL OAK DR.	ͽ <u>ℂ</u> .			82 Stre	et Addres	s (P.O. Box Number is	Not Acceptable)		,
DUN	EDIN FL 34698				83					1
					84 City			<del></del>	85 Zip (	Code
11. Pursuant	to the provisions of Sections 60 registered agent, or both, in the	7.0502 and 607.150	8, Florida Statut	es, the a	bove-nam	ed corpora	ation submits this state	ment for the purpose	of changing its	registered
office or i	registered agent, or both, in the same familiar with, and accept the c	State of Florida' Such  abligations of Section	h change was a	uthorize	d by the co	rporation's	s board of directors. I l	nereby accept the ap	pointment as re	gistered .
agent re	130010		- 200.0000, 110	,100 0111						•
CICNIATURE		+2011/2/14/	" American				٠.		lin laa	ļ
SIGNATURE	Signature, typed a printed name of register	TBV9/A5 ( red agent and title if applicab		: Registered	d Agent signatu	re required w	hen reinstating)	DATE	10/49	
SIGNATURE	Signature, typed of printed name of register OFFICER		le. (NOTE	: Registered	d Agent signatu	re required w		DATE GES TO OFFICERS	AND DIRECTO	ORS IN 12
	Signature, typed of remitted name of register OFFICER PDSV	red agent and title if applicab	le. (NOTE			re required w			AND DIRECTO	DRS IN 12
12.	OFFICER PDSV APPLE, DOUGLAS C.	red agent and title if applicab	le. (NOTE	13.	TLE	re required wi				
12.	PDSV APPLE, DOUGLAS C. 1251 ROYAL OAK DR.	red agent and title if applicab	le. (NOTE	13. 1.1 TI 1.2 N	TLE					
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12. TITLE NAME STREET ADDRESS	PDSV APPLE, DOUGLAS C. 1251 ROYAL OAK DR.	red agent and title if applicab	le. (NOTE	13. 1.1 TI 1.2 N 1.3 S	TLE AME TREET ADORE ITY-ST-ZIP					
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDSV APPLE, DOUGLAS C. 1251 ROYAL OAK DR.	red agent and title if applicab	Ie. (NOTE S	13. 1.1 TI 1.2 N 1.3 S 1.4 C	TLE AME TREET ADDRE ITY-ST-ZIP TLE				☐ Change	☐ Addition
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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

**FILED** 

Jan 28, 1999 8:00am

**Secretary of State** 

01-28-1999 90040 030 \*\*\*\*150.00