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 # L01272

1. Corporation Name
PEIRCE & ASSOCIATES, INC.

Principal Place of Business

Mailing Address P.O. BOX 520

99 JUL **27** PH 4: 24

AMENDED

FILED

1443 20TH STREET SUITE F VERO BEACH FL 32960		P.O. BOX 520 VERO BEACH FL 32961-0520			DO NOT WRITE IN THIS SPACE				:	
						3. Date incorporated or Qualified 07/10/1989				
2. Principal Place of Business		28	Mailing Address				FEI Number		Applied For	
<u> </u>		26				ł .	65-0132731		Not Applicable	
Sune Apt #, etc.		27	Suite, Apt. #, etc.			5.	Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		26	City & State				Election Campaign Financing Trust Fund Contribution	-	.00 May Be ded to Fees	
Zip 4	Country 25	29	Zip Country			8.	This corporation owes the current year in Personal Property Tax.	tangible Yes	□No	
	rent Regis	tered Agent	10. Name and Address of New Registered Agent							
HENDRIX, C. KENNON, ESQ.					Name					
1443 2	OTH STREET				Street Address (P.O. Box Number is Not Acceptable)					
SUITE F VERO BEACH FL 32960										
				84	Cny	-	EI	85	Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1598, 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 Types or printed hame of registered agent and title it a	Inducative (NOTE: 6	tepistered Apent signature r	paymen when reinstating:					
12.	OFFICERS AND DIREC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	V	DELETE	1.1 TITLE	V	Change	Addition			
NAME	PRINCE, TED -	•	1.2 NAME	William A. Bibo		,			
STREET ADDRESS	915 OLD DIXIE HWY SW		1.3 STREET ADDRESS	915 Old Dixie Hwy., S.W. Vero Beach, FL					
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP	Vero Beach, FL					
TITLE	PD	DELETE	2.1 TITLE		Change	Addition			
NAME	PEIRCE, MARK D.		2.2 NAME						
STREET ADDRESS	915 OLD DIXIE HWY SW		2.3 STREET ADDRESS	50000295	PATE	4			
C/TY-\$1-2P	VERO BEACH FL		2 4 CITY-ST-ZIP	-08/06/99	01070	<u> 120 </u>			
TITLE	DST	D DELETE	3.1 TITLE .	*****51.	25 D£## *	Addition			
NAME	PEIRCE, DALE E.		3.2 NAME						
STREET ADDRESS	915 OLD DIXIE HWY SW		3.3 STREET ADDRESS			j			
CITY-ST-2IP	VERO BEACH FL		34. CITY-ST-ZIP						
TITLE	DV	D DELETE	4.1 TITLE		☐ Change	Addition			
NAME	PEIRCE, GARY S.		4.2 NAME						
STREET ADDRESS	915 OLD DIXIE HWY SW		4.3 STREET ADDRESS			J			
CITY-ST-2P	VERO BEACH FL		44 CITY- \$1-ZIP						
TITLE		DELETE	51 TITLE		☐ Change	Addition			
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY+ST-ZIP			54 CITY+ST-ZIP		_				
TITLE		DELETE	6.1 TITLE		Cnange	Addition			
NAME			6.2 NAME		~1	5			
STREET ADDRESS		_	6.3 STREET ADDRESS		5	N			
CRY-\$1-ZIP			64 CITY-ST-ZIP			}			

14. Thereby 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 changer or purplement with an address, with all other the empowered.

SIGNATURE:

2 Verre

7/5/99

(561)567-1402