PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # L02698

HOOKER - WARD PROPERTIES, INC.

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Principal Place of Business Mailing Address											UIS 11010 B11		NAIK DIEK ALAN	#### BIBIH 1881	
300 GATLIN AVE 300 GATLIN AVE															
ORLANDO FL 32806 ORLANDO FL 32806															
										DO NOT WRITE IN THIS SPACE					
										Date Incorporate	d or Quali	fed			
_										07/17/1989					
Principal Place of Business 2a. Mailing Address]	1	FEI Number				pplied For	
21	26								ļ	<u>59-2121599</u>				ot Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.								5.	Certificate of Star	tus Desire	d - 🗆		Additional equired	
22 27														· —	
City & State City & State										Election Campai	-	ing 🗆		May Be	
23 28						Country				Trust Fund Cont				to Fees	
Zip	_	Country	\vdash	Zip		Country			8.	This corporation		current year In	itangible	□No	
24	25		29		30	<u> </u>			L	Personal Proper Name and Add		Dogistores			
	9. Name an	d Address of Curre	nt Regis	stered Agent		81	Τ,	Name	10.	Name and Add	ess of N	M Keñizrerer	Agent		
WAD	D FOANKLIN	N				"									
Ward, Franklin N. 300 Gatlin Ave						82 Street Addr			ss (P	O. Box Number	is Not Acc	eptable)			
ORLANDO FL 32806															
OND	ANDO IL 320	00				83								1	
						84	Τ,	City					85 Zip	Code	
							<u> </u>					FI			
office or re	egistered agent.	s of Sections 607.050 , or both, in the State and accept the obliga	of Florid	da. Such change w	as autnori	zea by	ពោ	named corpor ne corporation	ation 's bo	n submits this state pard of directors.	tement for I hereby a	ccept the appo	r changing its intment as re	s registered agistered	
SIGNATURE												0.175			
	Signature, typed or p	rinted name of registered age					nt și	signature required w			NOTE TO	DATE A	ND DIDECT	ODS IN 12	
12.	D	OFFICERS AI	ND DIRE	DELETI		13. 1 TITLE				ADDITIONS/CHA	NGES IU	OFFICERS A	Change	Addition	
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NAME	WARD, FRANKLIN N.					.2 NAME								ļ	
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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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90023 011 ***150.00