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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L15456

1. Corporation Name

21 26 59-2993806 N		For
P.O. BOX 266 PALM HARBOR FL 34682 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/11/1989 2. Principal Place of Business 2a. Mailing Address 25 25 26 Suite Apt # etc. Suite Apt # etc.	Applied For	
PALM HARBOR FL 34682 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 09/11/1989 09/11/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number A 21 26 N Suite Apt # etc \$8.75	Applied For	
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Suite Apt # etc\$8.75	(NOT PERIOR	
	5 Additional	
5. Certificate of Status Desired LI Fee R	e Required	
City & State City & State & Flection Campaign Financing \$5.00	00 May Be	30
	led to Fees	,
Zip Country Zip Country 8. This corporation owes the current year Intangible		
24 25 29 30 Personal Property Tax.	_ ⊟No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		
81 Name		
O'REILLY, PENNIE L 82 Street Address (P.O. Box Number is Not Acceptable)		
22/8 EDYTHE DRIVE		
DUNEDIN FL 34698 83		
84 City 85 Zip		1
FL 85 Zip	7in Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing it 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 r	Zip Code	orod
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	a its registere	ered
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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 affectment with an address, with all other like empowered.

SIGNATURÉ

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90066 031 ***150.00