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 # L32746

1. Corporation Name

EML PROPERTIES, INC.

Principal Place of Business	Mailing Address	11801(81) 888 11114 11			
C/O PETER D. GRAHAM 5200 CENTRAL AVENUE ST. PETERSBURG FL 33707	C/O Peter D. Graham 5200 Central Avenue St. Petersburg Fl 33707	DO			
		3. Date incorporated or 11/27/1989			
2. Principal Place of Business	2a. Mailing Address 26	4. FEI Number 59-2996797			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status E			
City & State	City & State	6. Election Campaign F Trust Fund Contributi			
Zip Country	Zip Country	8. This corporation owe			

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90045 050 ***150.00



	,					
Principal Place of Business Mailing Address				1 (\$61(\$)) 565 (1)16 (191) (196) \$1910 5101 6101 6101 6101 6101 6101 6101		
C/O PETER D.	GRAHAM	C/O PETER D. GRAHAM				
	5200 CENTRAL AVENUE 5200 CENTRAL AVENUE		DO NOT WRITE IN THIS SPACE			
ST. PETERSBU	RG FL 33/0/	ST. PETERSBURG FL 33	/0/			3. Date Incorporated or Qualifed
						11/27/1989
2. Principal P	lace of Business	of Business 2a. Mailing Address			4. FEI Number Applied For	
21		26			59-2996797 Not Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional		
22		27	27			Fee Required
City & Stat	te "	City & State		_	6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		ntry		8. This corporation owes the current year Intangible Personal Property Tax. Yes No
24	25	29	30	1		Personal Property Tax. Li Yes Li No 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Registered Agent		81	Name	IU. Harne and Addiess of New Hogistores Agent
GRA	HAM, PETER D.					
	CENTRAL AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)
	PETERSBURG FL 33707			83		
I			-			
ı				84	City	FL 85 Zip Code
44 Pursuant	to the provisions of Sections 607 050	72 and 607 1508. Florida Stat	intes the a	bovi	e-named cor	moration submits this statement for the purpose of changing its registered
office or r	registered agent, or both, in the State	of Florida. Such change was	authorized	1 by	the corporat	tion's board of directors. I hereby accept the appointment as registered
agent. I a	im familiar with, and accept the obliga	ations of, Section 607.0505, F	-ionda Stat	utes	•	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NC	TE: Registered	Ager	nt signature requi	ired when reinstating) DATE
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ρ.	☐ DELETE	1.1 TI	TLE		☐ Change ☐ Addition
NAME	LLOYD, III, JOHN A.		1.2 N	ME		
STREET ADDRESS	1926 ARROW HEAD DR. NE		1.3 \$	REE	TADDRESS	·
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 C	TY-S	T-ZIP	
TITLE		☐ DELETE	2.1 17	TLE		☐ Change ☐ Addition
NAME			2.2 N	ME		
STREET ADDRESS			2.3 S	TREET	T ADDRESS	
CITY-ST-ZIP			2.40	ITY-S	ST-ZIP	
TITLE		☐ DELETE	3.1 11	TLÉ		Addition
NAME	,		3.2 N	AME		
STREET ADDRESS			3.3 S	REET	TADDRESS	,
CITY-ST-ZIP	<u> </u>		3.4. 0	ITY-S	ST-ZIP	
TITLE		☐ DELETE	4.1 TI	TLE		☐ Change ☐ Addition
NAME			4, 2 N	AME	- 1	
STREET ADDRESS	, ,		4.3 5	REE	TADDRESS	
CITY-ST-ZIP					T-ZIP	
TITLE)	☐ DELETE	5.1 11		1	☐ Change ☐ Addition
NAME)		5.2 N		_	
STREET ADDRESS					TADDRESS	Į.
CITY-ST-ZIP					T-ZIP	
TITLE		DELETE	6.1 TI			☐ Change ☐ Addition
NAME	1		6.2 N	₩ E	}	
			1		TADDRESS	1

CITY-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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: