PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

or many component incho to

Feb 26, 1999 8:00 am Secretary of State

FILED

02-26-1999 90051 006 ***150.00

DOCUMENT # **L39255** 1. Corporation Name

VAUGHN & COMPANY, P.A.

.coll:

Principal Place of Business



1501 WEST FAIRBANKS AVENUE WINTER PARK FL 32789	1501 WEST FAIRBAÑKS AVENL WINTER PARK FL 32789	JE '	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/01/1990
2. Principal Place of Business	2a, Mailing Address	=	4. FEI Number Applied For
<u> </u>	26		59-2977574 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	27		5. Certifcate of Status Desired Fee Required
City & State	City & State		B. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year Intangible
24 25	29 30		Personal Property Tax. □Yes □No
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent
		81 Name	
VAUGHN, RENAE R.		82 Street Add	dress (P.O. Box Number is Not Acceptable)
1501 WEST FAIRBANKS AVE			
WINTER PARK FL 32789		83	
•		84 City	85 Zip Code
		'	├ └ }
 Pursuant to the provisions of Sections 607. office or registered agent, or both, in the St agent. I am familiar with, and accept the ob 	ate of Florida. Such change was autho	orized by the corpora	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature, typed or printed name of registered	Lagent and title if applicable (NOTE: Rec	istered Agent signature requi	ired when reinstating) DATE
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME VAUGHN, RENAE R.		1.2 NAME	,
STREET ADDRESS 1501 W. FAIRBANKS AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP WINTER PARK FL		1.4 CITY-ST-ZIP	
TITLE DV	. DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME GUEST, MARY B.		2.2 NAME	
STREET ADDRESS 1501 W. FAIRBANKS AVE		2.3 STREET ADDRESS	
CITY-ST-ZIP. WINTER PARK FL	-	2. 4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·
me ST	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME GALDER, JENNIFER MA	rgaret pytel Isoi W.Fahrbanki	3.2 NAME	
STREET ADDRESS 1501-W: FAIRBANKS AVE.	1501 W. FAIRBANKS	3.3 STREET ADDRESS	
CITY-ST-ZIP WINTER PARK-FL-	WINTER PARK FL	3.4, CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4, 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
		Leanance	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	

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 of an attachment with an address, with all other like empowered.

SIGNATURE:

487-740-0190