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

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90164 019 ***150.00

DOCUMENT # **L49454**

1. Corporation Name

EXCLUSIVELY YOURS INC.

| • | 17221 (00110) | | | | | | | | | | | | | | |
|---|---|--|-------------------------|--------------------------------|---|--|---|-------------------------------|--------------------------------------|---------------------------|--|---------------------------------------|----------------------|----------------------------|----|
| Principal Place | e of Business | | Mailing / | Address | | | | | t iffillitt att mitte | INITE BIRRE OF | 1811 a lat a sala | BIBII Aracı Bı | 111 6 1811 | 1 | |
| C/O JONATHAN DURFEE | | | C/O JONATHAN DURFEE | | | | | | | | | | | | |
| 440 FOURTH ROAD | | | 440 FOURTH ROAD | | | | | | | | | • | | | |
| KEY LARGO FL | | KEY LARGO FL 33037 | | | | | DO NOT WRITE IN THIS SPACE | | | | | | ~ | | |
| | | | | | | | | | e Incorporated of /07/1990 | or Qualifed | | | | ***** | |
| 2. Principal Pl | lace of Business | | 2a. Maili | ng Address | | | | 4. FEI | Number | | | | Appli | ed For | |
| 21 | | | 26 | | | | | 65 | -0171970 | _ | | | Not A | Applicable | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | 5 . Cer | tifcate of Status | Desired | | \$8.7 Fee | 5 Add Requ | | |
| City & State | | | | & State | | | | 6. Ele | ction Campaign | Financing | | - \$5.0 | 0 ма | ay Be | }- |
| 23 | | | 28 | | | | | 1 | st Fund Contribu | - | Ш | | ed to f | | |
| Zip | Coi | untry | Zip | | Coul | ntry | | 8. This | s corporation ow | es the cur | rent year Ir | ntangible | | | 1 |
| 24 | 25 | • | 29 30 | | | 0 | | | sonal Property 1 | | - | Yes | |]No | |
| | 9. Name and Ad | dress of Curren | | | | | ······································ | 10. Na | me and Addres | s of New I | Registered | d Agent | | |] |
| | | | | | | 81 | Name | | | | | | | | 1 |
| DURFEE, JONATHAN | | | | | | | Change A. C. | denna (D.C. | Day Numberia | lot Acces | able) | · · · · · · · · · · · · · · · · · · · | | | - |
| 440 FOURTH ROAD | | | | | | 82 | Street Add | aress (P.O. | Box Number is I | voi Accept | able) | | | | |
| KEY LARGO FL 33037 | | | | | | 83 | | | | | | | | | 1 |
| | | | | | Į | | | | | | | | | | 4 |
| | | | | | | | City | | | | F | | ір Со | | |
| office or n | to the provisions of registered agent, or to familiar with, and | ooth in the State | of Florida. Su | ich change was ai | uthonzed | i by th | named corporation | rporation sul tion's board | omits this statem of directors. I he | ent for the ereby acce | purpose of the purpos | of changing ointment a | its re regis | gistered stered | |
| -gon. / a | | accept the ounge | uons oi, secu | ION 607.0505, FIOI | nda Statu | utes. | | | | | | | | | |
| _ | , | accept the conga | | | nda Statu | utes. | | | | | | | | | |
| SIGNATURE | Signature, typed or printed | rrame of registered ager | at and title if applica | able. (NOTE | Registered | utes. | signature requir | ired when reinsta | | ES TO OS | DATE | ND DIREC | TOP | S IN 12 | |
| SIGNATURE | Signature, typed or printed | | at and title if applica | able. (NOTE | Registered | Agent s | signature requir | | iting) ITIONS/CHANG | ES TO OF | | | | | |
| SIGNATURE 12. TITLE | Signature, typed or printed | name of registered ager OFFICERS AN | at and title if applica | able. (NOTE | Registered 13. | Agent s | signature requir | | | ES TO OF | | ND DIREC | | S IN 12 | |
| SIGNATURE | Signature, typed or printed D DURFEE, JONA | name of registered ager OFFICERS AN | at and title if applica | able. (NOTE | Registered 13. 1.1 TIT | Agent s | | | | ES TO OF | | | | | |
| SIGNATURE 12. TITLE | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | able. (NOTE | Registered 13. 1.1 TIT | Agent s | signature requir | | | ES TO OF | | | | | |
| SIGNATURE 12. TITLE NAME | Signature, typed or printed D DURFEE, JONA | name of registered ager OFFICERS AN | at and title if applica | abio (NOTE RS | Registered 13. 1.1 TIT 1.2 NA 1.3 STI | Agent s FLE SME REET A | ODRESS | | | ES TO OF | | Chan | ge | ☐ Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | able. (NOTE | Registered 13. 1.1 T/T 1.2 NA 1.3 STI | Agent s FLE SME REET A | ODRESS | | | ES TO OF | | | ge | | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | abio (NOTE RS | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA | Agent s TLE ME TY-ST- TLE | DDRESS ZIP | | | SES TO OF | | Chan | ge | ☐ Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | abio (NOTE RS | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA | Agent s TLE ME TY-ST- TLE | ODRESS | | | ES TO OF | | Chan | ge | ☐ Addition | |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | RS DELETE | Registered 13. 1.1 T/I 1.2 NA 1.3 STI 1.4 C/I 2.1 T/I 2.2 NA 2.3 ST - 2.4 C/I | Agent s TLE AME TY-ST- TLE WE TREET A | DDRESS ZIP | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | abio (NOTE RS | Registered 13. 1.1 T/I 1.2 NA 1.3 STI 1.4 C/I 2.1 T/I 2.2 NA 2.3 ST | Agent s FLE WME TY-ST- FLE WME REET A TY-ST- TLE | ADDRESS | | | ES TO OF | | Chan | ge ge | ☐ Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | RS DELETE | Registered 13. 1.1 T/I 1.2 NA 1.3 STI 1.4 C/I 2.1 T/I 2.2 NA 2.3 ST - 2.4 C/I | Agent s FLE WE REET AI TY-ST- TLE WE REET A | DDRESS ZIP | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | RS DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 STi 1.4 CIT 2.2 NA 2.3 ST - 2.4 CI 3.1 Tif 3.2 NA | Agent s TLE AME TY-ST- TLE AME TREET A TY-ST- TLE AME | ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE | Registered 13. 1.1 TII 1.2 NA 1.3 STI 1.4 CII 2.2 NA 2.3 ST - 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 3.4 CI | Agent s TLE ME REET A TY-ST- TLE ME REET A REET A TIY-ST- TLE TLE TLE TLE TLE TLE TLE T | ADDRESS ADDRESS ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | RS DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cg 3.1 Tif 3.2 NA 3.3 ST | Agent s TLE ME REET A TY-ST- TLE ME REET A REET A TIY-ST- TLE TLE TLE TLE TLE TLE TLE T | ADDRESS ADDRESS ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DURFEE, JONA 440 FOURTH R | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE | Registered 13. 1.1 TII 1.2 NA 1.3 STI 1.4 CII 2.2 NA 2.3 ST - 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 3.4 CI | Agent s TLE REET A TY-ST TLE ME REET A TY-ST TLE ME REET A TTY-ST TLE TLE TLE TLE TLE TLE TLE | ADDRESS ADDRESS ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cf 3.1 Tif 3.2 NA 3.3 ST 3.4 Cf 4.1 Tif 4.2 NV | Agont s ILE ME REET A TLE ME REET A TLE ME REET A TLE AME REET A AME REET A AME REET A AME REET A AME | ADDRESS ADDRESS ADDRESS | | | SES TO OF | | ☐ Chan | ge ge | Addition | |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cf 3.1 Tif 3.2 NA 3.3 ST - 3.4 Cf 4.1 Tif 4.2 NJ 4.3 ST | Agont s ILE ME REET A TLE ME REET A TLE ME REET A TLE AME REET A AME REET A AME REET A AME REET A AME | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition Addition | וו |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cf 3.1 Tif 3.2 NA 3.3 ST 3.4 .Cf 4.1 Tif 4.2 NJ 4.3 ST 4.4 Cf 5.1 Tif 5.1 Tif | Agont s Agont s Agont s TLE ME REET A TY-ST- TLE ME TY-ST- TLE AME REET A TY-ST- TLE TREET A TY-ST- TLE TREET A TY-ST- TLE TREET A TY-ST- TLE TY-ST- TLE | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | | | ES TO OF | | ☐ Chan | ge ge | Addition | וו |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cf 3.1 Tif 3.2 NA 3.3 ST 3.4 . Cf 4.1 Tif 4.2 NJ 4.3 ST 4.4 Cf | Agont s Agont s Agont s TLE ME REET A TY-ST- TLE ME TY-ST- TLE AME REET A TY-ST- TLE TREET A TY-ST- TLE TREET A TY-ST- TLE TREET A TY-ST- TLE TY-ST- TLE | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition | |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE | Registered 13. 1.1 Tif 1.2 NA 1.3 ST 1.4 Cf 2.1 Tif 2.2 NA 2.3 ST - 2.4 Cf 3.1 Tif 3.2 NA 3.3 ST - 3.4 Cf 4.1 Tif 4.2 NJ 4.3 ST 4.4 Cf 5.1 Tif 5.2 NA | Agont s Agont s Agont s TLE ME REET A TY-ST- TLE ME REET A TY-ST- TLE AME REET A TY-ST- TLE | ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition | |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST - 2.4 CIT 3.1 TIT 3.2 NA 4.3 ST 4.4 CIT 4.2 NV 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST | Agont s Agont s Agont s TLE ME REET A TY-ST- TLE ME REET A TY-ST- TLE AME REET A TY-ST- TLE | ADDRESS ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition Addition | |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST - 2.4 CIT 3.1 TIT 3.2 NA 4.3 ST 4.4 CIT 4.2 NV 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST | Agont s Ago | ADDRESS ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition | |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DURFEE, JONA 440 FOURTH R KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE DELETE | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 3.4 CT 3.1 TIT 3.2 NA 4.3 ST 4.4 CT 4.1 TIT 4.2 NV 4.3 ST 4.4 CT 5.1 TIT 5.2 NA 6.3 ST 5.4 CT | Agont s Ago | ADDRESS ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition Addition | |
| SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | D DURFEE, JONA 440 FOURTH RI KEY LARGO FL | name of registered ager OFFICERS AN | at and title if applica | DELETE DELETE DELETE DELETE | Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST - 2.4 CI 3.1 TIT 3.2 NA 4.1 TIT 4.2 N 4.3 ST 4.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.2 NA | Agont s Ago | ADDRESS ADDRESS ADDRESS ADDRESS ZIP ADDRESS ZIP | | | SES TO OF | | ☐ Chan | ge ge | Addition Addition Addition | |

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.

CITY-ST-ZIP

