Feb 09, 1999 8:00 am Secretary of State

02-09-1999 90035 020 \*\*\*150.00

## 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 # L71130

SHIRLEY J. CROWNSBERRY, INC.

	(5)	6.4-11:- A			{ ; [ FOOLERS) OIL FROOL (100) FIRMO (1611 001) 4	KEMAN MAMEN MAMEN MAMEN MI	ION OF DIE 1001
Principal Place	e of Business	Mailing Address			*		
SHIRLEY J. (	CROWNSBERRY	% SHIRLEY J. CROWNSBEF	RRY				
101 13TH STRE	13TH STREET S.E. 104 13TH STREET S.E.						
WINTER HAVEN	I FL 33880-3121	WINTER HAVEN FL 33880-3	121	*	DO NOT WRITE IN	THIS SPACE	
	. , •				3. Date Incorporated or Qualifed	, , , , , , , , , , , , , , , , , , , ,	-
·	•		-		· ·	4	
調事					05/07/1990		<u> </u>
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21		26			59-3016724	Not	Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc.			00 00 10 10 1	\$8.75 A	
Suite, Apt.	#, GIO.	<u></u> →			5. Certifcate of Status Desired .	Fee Red	
22	•	27					·
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	,	8. This corporation owes the current year	r Intonaible	
	_ ´	- <del> </del>	—	•			FT1.1-
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registe	red Agent	
i			81	Name			
CRO	WNSBERRY, SHIRLEY J.						
			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
104 13TH STREET S.E.				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	in a frage of the land of the fe	- day magic years	
WINT	ter haven fl 33880		83	1	经国际 经	· 刘孝 36 李安敦祖等	51 441 44
le Lie.							胡斯特爾
inter			84	City		85 Zip C	ode
				- ,		FLII	
11. (Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	es. the abov	e-named con	poration submits this statement for the purpos	e of changing its i	registered ·
ital inffice or r	egistered agent, or both, in the State c	of Florida. Such change was au	uthorized by	the corporati	ion's board of directors. I hereby accept the a	ppointment as reg	istered
ra tagent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flor	ida Statutes	S.	9		
1224 (81)							
CONTRIBE							
SCNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered Age	m signature requir	red when reinstating) DAT	E	<del></del>
開張	Signature, typed or printed name of registered agent		Registered Age	nt signature requir			RS IN 12
12 a	OFFICERS ANI	D DIRECTORS	13.	m signature requir	red when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	
開張	OFFICERS AND		13. 1.1 TITLE	nt signature requir			RS IN 12
12 a	OFFICERS ANI	D DIRECTORS	13.	nt signature requir		S AND DIRECTOR	
12 8 TITE	OFFICERS AND PT CROWNSBERRY, SHIRLEY J.	D DIRECTORS	13. 1.1 TITLE 1.2 NAME	nt signature requir		S AND DIRECTOR	
12.8 TITLE NAME STREET ADDRESS	OFFICERS AND PT CROWNSBERRY, SHIRLEY J. 104 13TH ST S.E.	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS		S AND DIRECTOR	
HI RE 12.8  TITE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PT CROWNSBERRY, SHIRLEY J. 104 13TH ST S.E. WINTER HAVEN FL 33880	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	T ADDRESS		S AND DIRECTOR	Addition
12.8 TITLE NAME STREET ADDRESS	OFFICERS AND PT CROWNSBERRY, SHIRLEY J. 104 13TH ST S.E. WINTER HAVEN FL 33880 S	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS		S AND DIRECTOR	
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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.

6.4 CITY-ST-ZIP

SIGNATURE: