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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90071 029 \*\*\*150.00

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # L89121**

1. Corporation Name

CITY-ST-ZIP

SIGNATURE:

ALLIGATOR ALLEY, INCORPORATED

} 								
Principal Place	e of Business	Mailing Address	=				., ., ., ., ., ., .	
12973 VILLAGE BLVD			12973 VILLAGE BLVD					
MADEIRA BEACH FL 33708		UNIT 7A				DO NOT MIDITE IN TH	IC CDACE	
US		MADERIA BEACH F	MADERIA BEACH FL 33708			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 07/11/1990		
2. Principal P	lace of Business	2a. Mailing Addres	SS			4. FEI Number		pplied For
21	·	26				65-0204578		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	etc.			5. Certificate of Status Desired	<b>T</b> ,	Additional
22		27				<u> </u>	Fee F	Required
City & State	е	City & State	·			6. Election Campaign Financing		May.Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip		ountry		8. This corporation owes the current year		
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Cur	rrent Registered Agent			·	10. Name and Address of New Registere	d Agent	
CUIT	DAOOD CARVA			81	Name			.
	TWOOD, GARY M			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
1	73 VILLAGE BLVD							
UNIT				83				
( MAD	EIRA BEACH FL 33708			0.4	Cit		. 85 Zip	Code
{	z			84	City	F	L   65   2   P	Code
44 5	to the provisions of Sections 607	0502 and 607 1508 Florida	- C1-4-4 4				of changing if	s registered
I 11. Pursuant	to the binalities of pertions on.	יסטכי זועט טווג בטכט, דוטוועג	a Statutes, the	above	s-named corpo	pration submits this statement for the purpose	of changing i	
office or r	registered agent, or both, in the St	tate of Florida. Such change	e was authoriz	ed by '	the corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the ap	pointment as r	registered
office or r	registered agent, or both, in the St am familiar with, and accept the ob-	tate of Florida. Such change	e was authoriz	ed by '	the corporation	oration submits this statement for the purpose in's board of directors. I hereby accept the app	pointment as r	registered
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6.4 CITY-ST-ZIP

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 recorder 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, of on an attachment with any address, with all other like empowered.