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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L89529

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90049 026 ***150.00

PHOENIX	-SHAMROCK, INC							
Principal Place	of Business	Mailing Address			·			•••
1600 ALABAMA DR., #401 1600 ALABAMA DR., #401 WINTER PARK FL 32789 WINTER PARK FL 32789				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		
						07/23/1990]
2 Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	App	olied For
21		26				59-3021318		Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A Fee Red	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cou	ıntry		8. This corporation owes the current year	Intangible	
24	25	29	30			Personal Property Tax.		□No
,	9. Name and Address of Curre	ent Registered Agent		l		10. Name and Address of New Register	ed Agent	
				81	Name			
	N, JAMES P. ALABAMA DR. #401			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		* * * * * * * * * * * * * * * * * * *
WINT	TER PARK FL 32789			83	_,			
}	•			84	City	5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5	85 Zip C	ode
1				1 1	•		-L `	` }
office or re agent. I ar SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered a	gations of, Section 607.0505,	Florida Stat	tutes.	he corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the ap		gistered
12.		ND DIRECTORS	13				AND DIRECTO	RS IN 12
		AND DIRECTORS	13.	ITLE		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	Р					ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME	P Lyden, James P.		1.1 Π 1.2 N	IAME	ADDRESS	ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME STREET ADDRESS	P Lyden, James P. 1600 Alabama DR #401		1,1 Ti 1,2 Ni 1,3 Si	IAME TREET	ADDRESS - ZIP	ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Lyden, James P. 1600 Alabama DR #401 Winter Park Fl		1.1 TI 1.2 N 1.3 S 1.4 C	IAME TREET /		ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S	☐ DELETE	1.1 TI 1.2 N 1.3 S 1.4 C	IAME TREET / TILE		ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M.	☐ DELETE	1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N	IAME TREET / TTY-ST- TTLE IAME		ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M. 1600 ALABAMA DR #401	☐ DELETE	1.1 TI 1.2 NI 1.3 S 1.4 C 2.1 TI 2.2 NI 2.3 S	IAME TREET / TTY-ST- TTLE IAME	-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M.	☐ DELETE	1.1 TI 1.2 N 1.3 S 14 C 2.1 TI 2.2 N 2.3 S 2.4 C	IAME TREET / TILE IAME STREET / CITY-ST	-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M. 1600 ALABAMA DR #401	☐ DELETE	1.1 TI 1.2 N 1.3 S 14 C 2.1 TI 2.2 N 2.3 S 2.4 C	IAME ITREET / ITLE IAME ITREET / ITLE ITREET / ITLE ITLE ITLE	-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M. 1600 ALABAMA DR #401	☐ DELETE	1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI 3.2 N	IAME STREET / STY-ST- TTLE IAME STREET / CITY-ST TTLE IAME	-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M. 1600 ALABAMA DR #401	☐ DELETE . ☐ DELETE	1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C	IAME STREET / STY-ST- TTLE IAME STREET / CITY-ST TTLE IAME	-ZIP ADDRESS 1-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P LYDEN, JAMES P. 1600 ALABAMA DR #401 WINTER PARK FL S LYDEN, KRISTIN M. 1600 ALABAMA DR #401	DELETE	E 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 T 4.2 P 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C E 6.1 T	IAME ITREET / ITLE ITTLE ITTLE ITTLE ITTLE ITTLE ITTLE ITTLE ITTLE ITTLE	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 2IP ADDRESS ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change☐ Cha	Addition Addition Addition
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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.

SIGNATURE

DIQJAMES P. LYDEN