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 # L93946

DEMPSEY & ASSOCIATES, P.A.

Principal Place	of Business	Mailing Address						
390 N ORANGE AVE		P.O. BOX 1980			}			
STE #2700		ORLANDO FL 32802				DO NOT WRITE IN THIS SPACE		
ORLANDO FL 32801		US	US			3. Date Incorporated or Qualifed		
US .						08/13/1990		
						4. FEI Number Applie	d For	
2. Principal Pla	ace of Business	2a. Mailing Address	Mailing Address			4. 1 Et trames	pplicable	
· · · · · · · · · · · · · · · · · · ·		26				59-3026821 Not Ar \$8.75 Addi		
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		
2		27						
City & State	•	City & State				6. Election Campaign Financing \$5.00 Ma		
23		28				Trust runa Continuation		
Zip	Country	Zip	Zip Country .			8. This corporation owes the current year Intangible		
24	25	29 30	<u> </u>			Personal Property Tax.		
-3.1	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent		
			8	1 Name	•	·		
	PSEY, BERNARD H JR		82 Street Add		t Addres	dress (P.O. Box Number is Not Acceptable)		
390 1	N ORANGE AVE							
STE	#2700		8	3				
	ANDO FL 32801		-	-		85 Zip Coo	de e	
			1-	4 City		FL i i		
	1 Danking 607 050	and 607 1508 Florida Statutes	the abo	ve-name	d corpo	oration submits this statement for the purpose of changing its re- in's board of directors. I hereby accept the appointment as regis	gistered	
11. Pursuant	egistered agent, or both, in the State of	of Florida. Such change was auth	orized t	y the cor	poration	oration submits this statement for the purpose of clanging its register's board of directors. I hereby accept the appointment as regis	leieu	
agent. I a	egistered agent, or both, in the State on m familiar with, and accept the obligat	tions of, Section 607.0505, Florida	a Statut	85.			ļ	
SIGNATURE		AIOTE, Pa	alatarad A	nent signatur	e required	when reinstating) DATE		
	Signature, typed or printed name of registered agen	D DIRECTORS	13.	gunt organista		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	3 IN 12	
12.	C	D DELETE	1.1 TITU	 F		☐ Change	☐ Addition	
TITLE	D		1.2 NAM					
NAME	DEMPSEY, BERNARD H JR		L	EET ADDRES				
STREET ADDRESS	1132 COUNTRY CLUB DR.				"		· }	
CITY-ST-ZIP	ORLANDO FL			-ST-ZIP	_	☐ Change	Addition	
TITLE		☐ DELETE	2.1 TITL					
NAME		'	2.2 NAN	Œ	.	•		
STREET ADDRESS			2.3 STR	EET ADDRES	ss		ì	
CITY-ST-ZIP			2.4 CIT	Y-ST-ZIP		☐ Change	Addition	
TITLE		☐ DELETE	3.1 TITL	E)	. Citange		
NAME			3.2 NAM	Æ			ļ	
			3.3 STF	EET ADDRES	ss			
STREET ADDRESS			3.4. CIT	Y-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	4.1 TITI			Change	☐ Addition	
TITLE 	<u> </u>		4. 2 NA	ME				
NAME			1	REET ADORE	ss			
STREET ADDRESS	6			Y-ST-ZIP	1			
CITY-ST-ZIP		☐ DELETE	5,1 TIT			☐ Change	☐ Addition	
TITLE			5.1 111 5.2 NA					
NAME				REET ADDRE				
STREET ADDRESS	s				اس			
CITY-ST-ZIP	<u> </u>			Y-ST-ZIP		Change	Addition	
TITLE		☐ DELETE	6.1 TIT			Change		
NAME			6.2 NA			•		
STREET ADDRESS	s		6.3 ST	REET ADDRE	SS			
I SIKEELMUURES	01		•		- 1			

SIGNATURE:

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.

FILED

Feb 15, 1999 8:00am

Secretary of State

02-15-1999 90029 027 ***150.00