## 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 # L94722 1. Corporation Name

DDOWNDY CDOID INC

## Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90258 037 \*\*\*150.00

FNO/MA	nk dhour, inc.				-			
Principal Place	of Business	Mailing Address						
209 W CHURCH ST JAX FL 32202		209 W CHURCH ST JACKSONVILLE FL 32202				DO NOT WRITE IN THIS SPACE		
US US						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed	Į	
		1 - M-11 - Add				08/08/1990 4. FEI Number Applied Fo	<del></del>	
2. Principal Pl	ace of Business	2a. Mailing Address				\ <u>\</u>		
21	n .	Suite, Apt. #, etc.				\$8.75 Addition		
Suite, Apt.:	#, etc.					5. Certificate of Status Desired Fee Required	"	
City & State		City & State				6. Election Campaign Financing 5.00 May Be	$\Box$	
City & State	9	· ·				Trust Fund Contribution Added to Fees	'	
Zip	Country	Zip Country				This corporation owes the current year Intangible		
¬ · · · · · · ·		<del></del>				Personal Property Tax.		
24	9. Name and Address of Current		101			10. Name and Address of New Registered Agent		
	5. Italie and Address of Contin	regiono ou rigeria		81	Name			
RANI	NING, GEORGE W., JR.		1				——	
	W CHURCH ST		['	82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	(SONVILLE FL 32202			83				
UNO	CONTRICE TE GEEGE							
				84	City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							red	
=	in tainillar with, and accept the obligat	10113 Ot, December 601.10000, Florid						
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE. F	Registered A	Agent :	signature require	d when reinstating) DATE		
12.	OFFICERS ANI	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	DP	☐ DELETE	1.1 T/IT	Æ		☐ Change ☐ A	ddition 3	
NAME	BANNING, GEORGE W., JR.		1.2 NAME			·	}	
STREET ADDRESS	209 W CHRUCH ST		1.3 STREI		ADDRESS		[ ]	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CIT	Y-ST-	ZIP		}	
TITLE	DVS	☐ DELETE	2.1 TIΠ	Æ		☐ Change ☐ A	ddition	
NAME	BANNING, JEANNETTE G.		2.2 NAME				- {	
STREET ADDRESS	209 W CHURCH ST			REET /	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE_FL		2.4 CF		- ZIP			
TITLE		☐ DELETE	TE 3.1 TITLE			☐ Change ☐ A	ddition	
NAME			3.2 NA	ME		· · · · · · ·	ì	
STREET ADDRESS	335		3.3 STF	REET A	ADDRESS	t		
CITY-ST-ZIP			3.4. CIT	Y-ST	-ZIP	<u></u>		
TITLE		☐ DELETE	4.1 TITI	ιE		Change A	ddition	
NAME			4, 2 NA	ME				
STREET ADDRESS			4.3 STF	REET	ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-	ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ A	ddition	
NAME			5.2 NAI	MÊ				
STREET ADDRESS			5.3 ST	REET	ADDRESS	The state of the s		
CITY-ST-ZIP			5.4 CITY-		ZIP	·		
TITLE		☐ DELETE	6.1 TIT			∴ Change ☐ A	Addition	
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 STF	REET	ADDRESS			
CITY-ST-ZIP			6 4 CIT	Y-ST-	ZIP			

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 adachment with an address, with all other like empowered.

SIGNATURE: