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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L96180

CITY-ST-ZIP

MORGAN & PARTNERS, INC.

Principal Place	e of Business	Mailing Address						
4655 SALISBURY ROAD		4655 SALISBURY RD						
SUITE 110	. El .00050	SUITE 110				DO NOT WRITE IN THE	S SPACE	
JACKSONVILLE US	FL 32256	JACKSONVILLE FL 32256 US				3. Date Incorporated or Qualifed		
03	-	00				08/22/1990		1
2 Principal Pl	lace of Business	2a. Mailing Address			<u>×</u> #	4. FEI Number		Applied For
2. Principal Place of Business		26				59-3027743		lot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certifcate of Status Desired	Fee I	Required
- City & State	e	City & State				6. Election Campaign Financing	\$5.0	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year Ir	ntangible	
24	25	29	30			Personal Property Tax.	Yes	⊠ No
- 11	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	i Agent	
				81 1	lame			
	RGAN, MICHAEL D			82 5	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	5 SALISBURY RD				Ju cot madro			
JAC	KSONVILLE FL 32256			83				
				84 (Nik.		85 Zij	Code
				64	City	FI	L ⁶³ ²¹	Code
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Florida.	authorize orida Sta	d by the tutes.	corporation	ration submits this statement for the purpose on is board of directors. I hereby accept the appoint	ointment as	registered
	Signature, typed or printed name of registered age	<u>'''</u>		d Agent sig	nature required	when reinstating) DATE ADDITIONS (CHANGES TO OFFICERS A	ND DIDECT	TORS IN 12
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	IND DIRECT	UKSINIZ
TITLE		□ NCI CTE	8 4 4 T	m c				
	D MODOAN MICHAEL D	☐ DELETE		MLE			Chang	
NAME	MORGAN, MICHAEL D.	☐ DELETE	1.2 N	AME				
STREET ADDRESS	MORGAN, MICHAEL D. 149 WATER OAK DRIVE	☐ DELETE	1.2 N 1.3 S	IAME TREET AD	· · · ·			
STREET ADDRESS CITY-ST-ZIP	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL		1.2 N 1.3 S 1.4 C	IAME Treet ad :TTY-\$T-ZI	· · · ·		☐ Chang	e Addition
STREET ADDRESS	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL D	☐ DELETE	1.2 N 1.3 S 1.4 C 2.1 T	IAME TREET AD HTY-ST-ZI	· · · ·			e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL D MORGAN, CAROL		1.2 N 1.3 S 1.4 C 2.1 T 2.2 N	ame Treet ad Ity-St-Zi Itle Iame	Р		☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL D MORGAN, CAROL 149 WATER OAK DRIVE		1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S	AME TREET AD TTY-ST-ZI TTLE IAME	P DRESS		☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL D MORGAN, CAROL	DELETE	1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C	AME TREET AD TITY- ST-ZI TITLE TAME TREET AD CITY- ST-Z	P DRESS		☐ Chang	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MORGAN, MICHAEL D. 149 WATER OAK DRIVE PONTE VEDRA BCH FL D MORGAN, CAROL 149 WATER OAK DRIVE		1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T	AME TREET AD SITY-ST-ZI TILE NAME STREET AD CITY-ST-Z	P DRESS	, · · · · · · · · · · · · · · · · · · ·	☐ Chang	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.

6.4 CITY-ST-ZIP

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90035 043 ***150.00