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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

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Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90004 046 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M61619

A PLACE IN TIME, INC.

Principal Place of Business Mailing Address								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6.6 2.2 6.5 6	
805 CAROLINE ST		805 CAROLINE ST								
Fredericksburg va 22401 Us		FREDERICKSBURG VA 22401 US					DO NOT WRITE IN THIS SPACE			
US		03					3. Date Incorporated or Quali	fed		• •
							10/28/1987			
2. Principal P	lace of Business	2a.	Mailing Address	-			4. FEI Number		Ар	plied For
21		26					65-0012401	· .	No	t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desire	d 🗆	\$8.75 A	
22		27						 	Fee Re	
City & State	e	\Box	City & State				6. Election Campaign Financi	^{ng} □	\$5.00	· 1
23		28			 .		Trust Fund Contribution		Added t	o rees
Zip	Country	\vdash	Zip	Count	ıry		8. This corporation owes the	current year		□No
24	25	29	tared Arent	30			Personal Property Tax. 10. Name and Address of Ne	w Register		
	9. Name and Address of Curre	ent Regis	tered Agent	1	31	Name	to. Halle and Address of the			
JENS	Sen, robert									
	PONCE DE LEON BLVD.			8	32	Street Addre	ess (P.O. Box Number is Not Acc	eptable)		
#305				-	83		- A - A - A	13.	فيؤن أبانين	
**	AL GABLES FL 33146							<u>: 14 </u>	1 2 17 11 2	
				8	84	City		F	85 Zip (Code
SIGNATURE	m familiar with, and accept the oblig								<u> </u>	
	Signature, typed or printed name of registered ag	gent and title i	f applicable. (NOT	E: Registered A	gent s	signature required		DATE		
12.	Signature, typed or printed name of registered ag OFFICERS A		CTORS	E: Registered A	gent s	signature required	ADDITIONS/CHANGES TO		AND DIRECTO	
12.	OFFICERS A					signature required				PRS IN 12
	OFFICERS A T BALCH, RICHARD H. JR		CTORS	13. 1.1 TITU 1.2 NAM	E ME				AND DIRECTO	
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6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ICER OR DIRECTOR

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 suppliemental 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.