, PROFIT CORPORATION ANNUAL REPORT 1999	•	FLORIDA DEPAR Katheri Secretar DIVISION OF C	ne Har y of Sta	ris e	FILED 99 JUN 29 AM 11:33	
DOCUMENT # M80995 1. Corporation Name ELWER HOMES, INC.					THE ETARY OF STATE Hallahasgee, florida	
۰						
Principal Place of Business 2317 BLANDING BLVD SUITE 201-6		Mailing Address	TE 004			
2317 BLANDING BLVD., SUITE 204-B JACKSONVILLE FL 32210 JACKSONVILLE FL 32210				DO NOT WRITE IN THIS SPACE		
•					3. Date Incorporated or Qualifed 05/13/1988	
2. Principal Place of Business		a. Mailing Address		· · · - · ····	4. FEI Number Applied For	
Suite, Apt. #, etc.	26	Suite, Apt. #, etc.			59-2878745 Not Applicat	
22	27				5. Certificate of Status Desired Fee Required	
City & State	28	City & State			6. Election Campaign Financing Trust Fund Contribution	
	untry	Zip	Cou	ntry	Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible	
25 S. Name and Ar	29 ddress of Current Reg		30		Personal Property Tax Ü Yes No 10. Name and Address of New Registered Agent	
	usives of current reg	Intered Agent		81 Name	IV. Name and Address of New Registered Agent	
ELWER, KEVIN J. 5642 Connie Jean (NRIVE			82 Street Add	fress (P.O. Box Number is Not Acceptable) F;00002925596	
JACKSONVILLE FL 32222					<u> </u>	
JACKSONVILLE FL 32	222			83	FININ2925586	9
JACKSONVILLE FL 32	222			83	-07/07/9901076024 ****150:00 ;_\$*\$\$150:0	<u>0</u>
11. Pursuant to the provisions of	Sections 607 0502 and	607 1508 Elorida Statute	s the s	83 84 City	-07/07/99010/6024 ****150.00 <u>****150.00</u> FL est 20 Cost -0 FL	0
11. Pursuant to the provisions of office or registered agent, or t agent. I am familiar with, and SIGNATURE	Sections 607.0502 and ooth, in the State of Flor accept the obligations c	rida. Such change was au of, Section 607.0505, Flori	ithorized ida Stati	83 84 City pove-named cor by the corporat ites.	-07/07/99010 (6024 ****150.00 ****150.0 FL poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	0
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE	Sections 607.0502 and poth, in the State of Flor	rida. Such change was au of, Section 607.0505, Flori e l'applicable (NOTE)	ithorized ida Stati	83 84 City pove-named corr by the corporat	-07/07/99010 (6024 ****150.00 ****150.0 FL poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature, typed or printed 12. TITLE PD	Sections 607.0502 and poth, in the State of Flor accept the obligations of name of registered agent and UK OFFICERS AND DIR	rida. Such change was au of, Section 607.0505, Flori e l'applicable (NOTE)	ithorized ida Stati	83 84 City xove-named corr by the corporat rtes.	-07/07/99010 /6024 ****150.00 ****150.01 FL poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature, typed or printed 12. • TITLE PD RAME PL WER, KEVIN	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered agent and title OFFICERS AND DIR J.	rida. Such change was au of, Section 607.0505, Flori e l'applicable (NOTE ECTORS	Registered 1.1 Til 1.2 NA	83 84 City xove-named corr by the corporat ites. Agent signature require LE ME	-07/07/99010 /6024 ****150.00 ****150.01 FL B3 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature, typed or printed 12. TITLE PD ELWER, KEVIN STREET ADDRESS	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered agent and title OFFICERS AND DIR J. EAN DR.	rida. Such change was au of, Section 607.0505, Flori e l'applicable (NOTE ECTORS	Registered 13. 1.1 Til 1.2 NA 1.3 ST	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS	-07/07/99010 /6024 ****150.00 ****150.01 FL B3 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. TITLE PD ELWER, KEVIN STREET ADDRESS 5642 CONNIE JACKSONVILLE TITLE STD	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and Bit OFFICERS AND DIR J. EAN DR. FL	rida. Such change was au of, Section 607.0505, Flori e l'applicable (NOTE ECTORS	Registered 13. 1.1 Til 1.2 NA 1.3 ST	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADDRESS Y-ST-ZIP	-07/07/99010 /6024 ****150.00 ****150.01 FL B3 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. • • • • • • • • • • • • • • • • • • •	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR.	rida. Such change was au of, Section 607.0505, Flori e #applicable (NOTE ECTORS	Ithorizec Registered 13. 1.1 Til 1.2 NA 1.3 ST 1.4 Ci 2.1 Til 2.2 NA	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE	-07/07/99U1U (6U24 ****150.00 ****150.00 FL 83 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. • • • • • • • • • • • • • • • • • • •	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	rida. Such change was au of, Section 607.0505, Flori e #applicable (NOTE ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 1.2 Na 1.3 ST 1.4 Cr 2.1 Til 2.2 Na 2.3 ST 2.3 ST	83 84 City xove-named corr by the corporat tes. Agent signature requir LE ME REET ADDRESS Y-ST-ZIP LE WE REET ADDRESS	-07/07/99U1U (6U24 ****150.00 ****150.00 FL 83 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. • PD 11. PD ELWER, KEVIN & STREET ADDRESS STACKSONVILLE TITLE PD ELWER, KEVIN & ST642 CONNIE J STREET ADDRESS STERNBERG, JE STERNBERG, JE STRET ADDRESS CITY-ST-ZP ATLANTIC BEAC	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	rida. Such change was au of, Section 607.0505, Flori e #applicable (NOTE ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 1.2 Na 1.3 ST 1.4 Cr 2.1 Til 2.2 Na 2.3 ST 2.3 ST	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS IY-ST-ZIP	-07/07/99U1U (6U24 ****150.00 ****150.00 FL 83 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature, typed or printed 12. PD ELWER, KEVIN & STREET ADDRESS 5642 CONNIE JI JACKSONVILLE TITLE STD NAME STEERNBERG, JE STREET ADDRESS 1244 LINKSIDE CITY-ST-ZP ATLANTIC BEAC TITLE NAME	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flori ECTORS	Ithorizec ida Statu Registered 13. 1.3 1.1 1.2 Ma 1.3 ST 1.4 CI 2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS IY-ST-ZIP LE WE VE		ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature, typed or printed 12. PD ELWER, KEVIN STREET ADDRESS 5642 CONNIE JI JACKSONVILLE TITLE STD NAME STEENBERG, JE 1244 LINKSIDE 1244 LINKSIDE CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS STREET ADDRESS	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flori ECTORS	Ithonizec ida Statu Registered 13. 1.1 TU 12.04 1.3 ST 1.4 CT 2.1 TU 2.2 NA 2.3 ST 2.4 CC 3.1 TU 3.2 NA 3.3 ST 3.3 ST	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS		ition
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. TITLE PD NAME STREET ADDRESS CITY-ST-ZP STREET ADDRESS CITY-ST-ZP ATLANTIC BEAC TITLE STREET ADDRESS CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS CITY-ST-ZP	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flori ECTORS	Ithonizec ida Statu Registered 13. 1.1 TU 12.04 1.3 ST 1.4 CT 2.1 TU 2.2 NA 2.3 ST 2.4 CC 3.1 TU 3.2 NA 3.3 ST 3.3 ST	83 84 City xove-named corr by the corporat ites. Agent algoature required KE REET ADDRESS Y-ST-ZIP LE WE REET ADDRESS IY-ST-ZIP LE WE REET ADDRESS IY-ST-ZIP		tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. hyped or printed 12. • TITLE PD ELWER, KEVIN S5642 CONNIE J JACKSONVILLE TITLE STD STERNBERG, JE 1244 LINKSIDE I244 LINKSIDE I124 LINKSIDE I1244 LINKSIDE I124 LINKSIDE I1244 LINKSIDE I124 LINKSIDE I1244 LIN	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 12.04 1.3 ST 1.4 Cl 2.1 Til 22.04 2.3 ST 2.4 Cl 3.1 Til 3.3 ST 3.4 Cl 4.1 Til	83 84 City xove-named corr by the corporat ites. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP LE ME	[7//07/99U1U (6U24 ****150.00 *****150.00 FL 85 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. hyped or printed 12. * TITLE PD STREET ADDRESS CITY-ST-ZP STREET ADDRESS CITY-ST-ZP STREET ADDRESS CITY-ST-ZP ATLANTIC BEAC ITTLE STREET ADDRESS CITY-ST-ZP ATLANTIC BEAC ITTLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS STREET ADDRESS	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 12.04 1.3 ST 1.4 Cl 2.1 Til 22.04 2.3 ST 2.4 Cl 3.1 Til 3.3 ST 3.4 Cl 4.1 Til 4.3 ST 4.3 ST	83 84 City xove-named corporat by the corporat tes. Agent signature requir LE ME REET ADDRESS Y-ST-ZIP LE WE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	[7//07/99U1U (6U24 ****150.00 *****150.00 FL 85 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. * TITLE PD NAME ELWER, KEVIN stratect ADDRESS CITY-ST-ZP JACKSONVILLE TITLE STD NAME STERNBERG, JE STREET ADDRESS 1244 LINKSIDE CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 12.04 1.3 ST 1.4 Cl 2.1 Til 22.04 2.3 ST 2.4 Cl 3.1 Til 3.3 ST 3.4 Cl 4.1 Til 4.3 ST 4.3 ST	83 84 City xove-named corr by the corporatiles. Agent signature required REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP	[7//07/99U1U (6U24 ****150.00 *****150.00 FL 85 Zip Code poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi	tion tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. • TITLE PD STREET ADDRESS CITY-ST-ZIP TITLE VAME	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Registered 13. 1.1 Til 12 NA 1.3 ST 1.4 Cl 2.1 Till 22 NA 2.3 ST 2.4 Cl 3.3 ST 3.4 Cl 3.4 Cl 4.1 Till 4.2 NV 4.3 ST 4.4 Cl1 5.1 Till 5.1 Till 5.2 NA	83 84 City xove-named corporat by the corporat tes. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP RE REE REE RE REE REE RE RE R		tion tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. hyped or printed 12. * TITLE PD Streat ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS <td>Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE</td> <td>Ida. Such change was au of, Section 607.0505, Flor ECTORS</td> <td>Ithonizec ida Statu Rogistered 13. 1.1 Tili 12 NA 1.3 ST 1.4 Cl 2.1 Tili 22 NA 2.3 ST 2.4 Cl 3.1 Tili 33 ST 3.4 Cl 4.1 Tili 4.3 ST 4.4 Cl1 5.1 Tili 5.3 ST</td> <td>83 84 City xove-named corporat tes. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE RE RE RE RE RE RE RE RE R</td> <td></td> <td>tion tion</td>	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Rogistered 13. 1.1 Tili 12 NA 1.3 ST 1.4 Cl 2.1 Tili 22 NA 2.3 ST 2.4 Cl 3.1 Tili 33 ST 3.4 Cl 4.1 Tili 4.3 ST 4.4 Cl1 5.1 Tili 5.3 ST	83 84 City xove-named corporat tes. Agent signature requir LE ME REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE WE REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE REET ADORESS Y-ST-ZIP RE RE RE RE RE RE RE RE RE R		tion tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. • TITLE PD NAME ELWER, KEVIN street ADDRESS STREET ADDRESS 5642 CONNIE Ji JACKSONVILLE TITLE STD NAME STERNBERG, JE STREET ADDRESS 1244 LINKSIDE CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME <	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor ECTORS	Ithonizec ida Statu Rogistered 13. 1.1 Tili 12 NA 1.3 ST 1.4 Cl 2.1 Tili 22 NA 2.3 ST 2.4 Cl 3.1 Tili 33 ST 3.4 Cl 4.1 Tili 4.3 ST 4.4 Cl1 5.1 Tili 5.3 ST	83 64 City xove-named corr by the corporat tes. Agent signature requir tes. Agent signature requir tes. EE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP LE ME REET ADORESS Y-ST-ZIP		tion tion tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. * TITLE PD NAME ELWER, KEVIN street ADDRESS CITY-ST-ZP JACKSONVILLE TITLE STD NAME STERNBERG, JE STREET ADDRESS 1244 LINKSIDE CITY-ST-ZP ATLANTIC BEAC TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor (NOTE ECTORS DELETE DELETE	Ithonizec ida Statu Registered 13. 1.1 Til 1.2 NA 1.3 ST 1.4 Ci 1.3 ST 2.4 Ci 3.1 Til 2.2 NA 2.3 ST 2.4 Ci 3.3 ST 3.4 Ci 4.1 Till 4.2 NA 4.3 ST 4.4 Cill 5.1 Till 5.2 NA 5.3 ST 5.4 Cill 6.1 Till 6.2 NA	83 64 City xove-named cor by the corporat tes. Agent signature requir tes. Agent signature requir tes. Agent signature requir tes. Keet ADORESS Y-ST-ZIP LE KEET ADORESS Y-	[7//07/99UIU (6U24 *****150.00 *****150.00 FL 85 Zip Co38 poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered abben renstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi	tion tion tion
11. Pursuant to the provisions of office or registered agent, or tagent. I am familiar with, and SIGNATURE Signature. typed or printed 12. TITLE PD NAME STREET ADDRESS STD TITLE STD STREET ADDRESS STERNBERG, JE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS 1244 LINKSIDE	Sections 607.0502 and both, in the State of Flor accept the obligations of name of registered egent and the OFFICERS AND DIR J. EAN DR. FL ROME, JR. DRIVE	Ida. Such change was au of, Section 607.0505, Flor (NOTE ECTORS DELETE DELETE	Ithonizec ida Statu Rogistered 13. 1.1 Tili 12 NA 1.3 ST 1.4 Cl 2.1 Tili 22 NA 2.3 ST 2.4 Cl 3.1 Tili 33 ST 3.4 Cl 4.1 Tili 4.2 NA 33 ST 3.4 Cl 5.1 Tili 5.1 Tili 5.2 NA 5.3 ST 5.4 Cl1 6.1 Tili 6.2 NA 6.3 ST 5.3 ST	83 64 City xove-named corr by the corporat tes. Agent signature requir tes. Agent signature requir tes. KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST	[7//07/99UIU (6U24 *****150.00 *****150.00 FL 85 Zip Co38 poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered abben renstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi	tion tion tion



KEVIN J. ELWER & ASSOCIATES, INC.

CONTRACTOR C.R. C018879

6/23/95

Yo whom it May Concern,

Unclosed you will find 2 keports. (Annual Corp. Report 1999) for Kewin 9. Elwer & Assoc., Inc (Aloc # J17905) and Elwer & Innes, Inc (Doc. # M80995). The person that was responsible for filen, these reports no longer is employed by Our Co. As it was revuewing her files. I notices that these reports were not filed by the alatted time. I'm hopin, that you will Waine the 400.00 late fee. Enclosed are Checks for 150.00 late fee. Enclosed are Checks for 150.00 late fee. Enclosed are checks for 150.00 late fee. Interest Manage Men.