## 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 # M90155

1. Corporation Name

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

JOHELEN HARTLEY REALTY, INC.

Principat Plac	ce of Business	Mailing Address			\$1511 <b>91911</b> 41911 91811 91811
OO CLIFTON	C. CURRY. JR.	750 W. LUMSDEN ROAD		·	
420 W. BRANDON BLVD. BRANDON FL 33511					
BRANDON FL 33511 US			DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualifed	· · · · · · · · · · · · · · · · · · ·
				07/18/1988	
<ol><li>Principal I</li></ol>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
4				59-2901874	Not Applicable
Suite, Apt	ite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
1	27				
City & Sta	ty & State City & State			6. Election Campaign Financing	\$5.00 May Be
•	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
4	25	29 3		Personal Property Tax.	☐ Yes ☐ No
•	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
			81 Name		
	RRY, CLIFTON C., JR.		82 Street A	ddress (P.O. Box Number is Not Acceptable)	·
750	W. LUMSDEN ROAD		621 Suber A	duress (F.O. DOX Number is Not Notophiloto)	
BR/	ANDON FL 33511		83		
			84 City	FI	85 Zip Code
				orporation submits this statement for the purpose o	
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable (NOTE: F	Registered Agent signature rec	jurred when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ DELETE	1.1 TITLE	•	☐ Change ☐ Addition
IAME	HARTLEY, JOHELEN		1.2 NAME		
TREET ADDRESS	ANAT ACCENCE MAI DIOO DD		1.3 STREET ADDRESS		
	SEFFNER FL		1.4 CITY-ST-ZIP	•	
OTY-ST-ZIP OTLE	DST	□ DELETE	2.1 TITLE	,	☐ Change ☐ Addition
	1		2.2 NAME		
AME	HARTLEY, MARSHALL 1617 SEFFNER-VALRICO RD.		2.3 STREET ADDRESS	• •	
STREET ADDRESS		<b>~</b> ⁻′	<b>1</b>	والرامد الرابطينة والأراب لليسار فالمستقدمة ليميز واحرامه وكالمتحافظ	
CITY-ST-ZIP	SEFFNER FL	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE	CTEDUEN MADE	- December	3.2 NAME	·	
NAME	STEPHEN, MARK				
STREET ADDRESS			3.3 STREET ADORESS		
CITY-ST-ZIP	SEFFNER FL				
TITLE		C perese	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
IAME		☐ DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
STREET ADDRESS		☐ D€LETE	4.1 TITLE 4.2 NAME	<u> </u>	☐ Change ☐ Addition
		☐ DELETE	4.1 TITLE	·	☐ Change ☐ Addition
CITY-ST-ZIP			4.1 TITLE 4.2 NAME	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		

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 change), or on an attachment with an address, with all other like empowered. SIGNATURE:

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

DELETE

Addition

**FILED** 

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90070 038 \*\*\*150.00