### **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

### 1999

# DOCUMENT # N9800003714 1. Corporation Name

GADSDEN 10/90 COMMERCE PARK OWNERS' ASSOCIATION, INC.

Principal Place of Business 2324 CENTERVILLE RD TALLAHASSEE FL 32308

Mailing Address

2324 CENTERVILLE RD TALLAHASSEE FL 32308

# **FILED** Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90143 035 \*\*\*\*61.25



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<u> </u>	lace of Business	2a. Mailing A	<b>D</b> -/	ר 4 ו	<u> </u>	Date Incorporated or Qualifed     06/24/1998	ī	· ·	
Suita Ant	# ata	Suite, Apt		(7/	7 /	4. FEI Number		ADI ADI	plied For
Suite, Apt.	#, etc.	— — · · ·	. <del> </del>				OR	4.	t Applicable
22		27 City & Sta						\$8.75 A	
City & State	e	28 74/	AHAS	SEE	FI	5. Certifcate of Status Desired		Fee Re	
Zip	Country	Zip	<u> </u>	Country		6. Election Campaign Financing		\$5.00	Mav Be
24	25	29 3 2 3	317 3	زر آه	SA.	Trust Fund Contribution		Added to	•
	9. Name and Address of Currer		nt	<del>-,</del> -		10. Name and Address of New	Registered /	Agent	
<u>_</u> _				81	Name	<del>-</del>	_		
LUNIT MUNIC ID					Stroot Add	iress (P.O. Box Number is Not Accept	table)		
HUNT, JOHN E JR				82	Ottaer voo	11655 (F.O. DOX Manual is Not Accop			
2324 CENTERVILLE RD TALLAHASSEE FL 32308				83					
IALLAHAS	DOEE PL 32300			-		<u> </u>	_	85 Zip C	`odo
				84	City		FL	85 Zip C	Jude
l office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State in familiar with, and accept the obligation.	of Florida, Such ch	nange was autr	nonzeo by	the corporat	poration submits this statement for the tion's board of directors. I hereby acce	ept the appoir	itment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered age	at and title if applicable	(NOTE: R	egistered Age	nt skonature requir	red when reinstating)	DATE		
12.		D DIRECTORS	(1.0.12.11	13.		ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TITLE				Change	Addition
NAME	WHITE, ARMER E			1.2 NAME					
STREET ADDRESS	2324 CENTERVILLE RD			1.3 STREE	T ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32308			1.4 CITY-5	T-ZIP				
TITLE	STD		DELETE	2.1 TITLE				Change	☐ Addition
NAME	HUNT, JOHN E SR			2.2 NAME					
STREET ADDRESS	2324 CENTERVILLE RD				TADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32308			2, 4 CITY-1	ST-ZIP				
TITLE	PD		DELETE	3.1 TITLE				Change	☐ Addition
NAME	HUNT, JOHN E JR			3.2 NAME					
STREET ADDRESS	l			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32308			3.4. CITY-	ST-ZIP				
TITLE	TALLAMASSEE TE SESSO		DELETE	4,1 TITLE	*			☐ Change	☐ Addition
NAME				4, 2 NAME					
STREET ADDRESS				I	TADORESS				
``				4.4 CITY-S	1				
CITY-ST-ZIP			DELETE	5.1 TITLE	.,	<del> </del>		Change	Addition
NAME		_	_	5.2 NAME					
·				5.3 STREE	T ADDRESS				
STREET ADDRESS				5.4 CITY-S	Ϋ́				
CITY-ST-ZIP			DELETE	6.1 TTLE	•		_	☐ Change	Addition
l		_		6.2 NAME					
NAME					TADORESS				
STREET ADDRESS	I								

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 fire 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 opporation or the regeiver or fustee empowered to execute this report as required by Chapter 617. 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

SIGNATURE:

C/TV-ST-ZIP