Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90193 030 ***150.00

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 # P17303

DAVID BRINKLEY ENTERPRISES, INC.							1 PROGRESS PRO (1041 14000 111)	(† 88188 1141 818 1)	ı dırılı diğil bibli di	
Principal Place of Business Mailing Address						ı		##100 (111 01011	 	(8)(8)8() (88)
9909 COLLINS AVENUE 9909 COLLINS AVENUE										
BAL HARBOUR FL 33154 BAL HARBOUR FL 33154							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualif 12/18/1987	ed		
2. Principal Pla	ace of Business	2a. Mailing Address					4. FEI Number	_	Арр	lied For
21	·	26				<u>52-1196542</u>			Applicable	
Suite, Apt.	¥, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A		
22		27					_	Fee Rec	` —	
City & State	•	City & State				6. Election Campaign Financia	ng 🗆	\$5.00 i Added to		
23		Zip Country				Trust Fund Contribution			rees	
Zìp	Country 25	— — — — —	_	u iu y			This corporation owes the or Personal Property Tax.	urrent year it		□No
24	9. Name and Address of Curren		0	$\overline{}$			10. Name and Address of Ne	w Registerer		
				81	Name		-			•
CORPORATION SERVICE COMPANY				82	Ctront (A dideas	s (P.O. Box Number is Not Acce	ontable)		
1201 HAYS STREET				02	Sueera	Addres	3 (F.O. BOX NUMBER IS NOT ACC	,ршою,		
TALLAHASSEE FL 32301				83			-			
				24	0.4	·	 	_	85 Zip C	ode
				84	City			F		
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607.050: gistered agent, or both, in the State n familiar with, and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was aut tions of, Section 607.0505, Florid	, the a horized la Stat	bove by utes	e-named of the corpo	corpor oration	ation submits this statement for 's board of directors. I hereby ac	he purpose of cept the appo	of changing its regintment as reg	registered istered
SIGNATURE	Signature, typed or printed name of registered agen	of and title if applicable (NOTE: B	legistered	l Azen	t signature re	en ired u	hen reinstating)	DATE		\
12.		ID DIRECTORS	13.	- Ageir	t signaturo re	equilion ii	ADDITIONS/CHANGES TO		ND DIRECTOR	RS IN 12
TITLE	01102101110			TLE	-				Change	☐ Addition
NAME	BRINKLEY, DAVID	DAVID 121			1					
STREET ADDRESS			1.3 \$7	TREET	ADDRESS	ļ				ĺ
CITY-ST-ZIP	BAL HARBOUR FL 33154			1.4 CITY-ST-ZIP						
TITLE	VS	☐ DELETE	2.1 TITLE						Change	Addition
NAME	Brinkley, Susan		2.2 NAME							}
STREET ADDRESS	9909 COLLINS AVENUE		2.3 STREE		ADDRESS		-			[
CITY-ST-ZIP	BAL HARBOUR FL 33154		2. 4 CIT		CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE		- 1	1			Change	Addition
NAME			32 NAME							ſ
STREET ADDRESS			3.3 STREE		ADDRESS					Ì
CITY-ST-ZIP			3.4. CITY-		T-ZIP	\				Para a salidan
TITLE		☐ DELETE	4.1 TITLE						Change	Addition
NAME			4.2 N	4. 2 NAME						
ONLE POSITION			4.3 \$	4.3 STREET ADDRESS						
51.1 51.21			4.4 CITY- ST-ZIP				_	Chanca	□ Addition	
				5.1 TITLE 5.2 NAME					☐ Change	☐ Addition
NAME			5.2 N	AME	i					

CITY-ST-ZIP 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 it is 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 Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

5 3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Daytime Phone #

Change

Addition