PROFIT · CORPORATION. ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9200006746

1. Corporation Name

Principal Place		Mailing Address 405 SOUTH DUNCAN AVE	<u>.</u>		
CLEARWATER FL 34615 SUITE 4				DO NOT WRITE IN THIS	CDACE
US		CLEARWATER FL 33755 US		3. Date Incorporated or Qualifed	3FAOL
				11/19/1992	
2. Principal Pl	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3162296	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22	· · · · · · · · · · · · · · · · · · ·	27			Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28 Zin	Country	Trust Fund Contribution	
Zip	Country	Zip 30	¬ '	<ol><li>This corporation owes the current year Inta Personal Property Tax.</li></ol>	∏Yes □No
24	9. Name and Address of Curren		<u>'</u>	10. Name and Address of New Registered	
TOWNSEND, JAMES WQ 2958 KENILWICK DR SOUTH				Ownsend James Less (R.O. Box Number is Not Acceptable)	U.
SUITE 4			83	8 Kenilwick Dr Sou	71
CLEARWATER FL 33761			63		
			84 City	Jearwater FL	85 Zip Code 33161
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was auth	iorized by the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	changing its registered ntment as registered
SIGNATURE	Signature, typed or printed name of registered ages	t and title if applicable (NOTE: De	egistered Agent signature required	d when reinstating) DATE	<u> </u>
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TOWNSEND, JAMES W		1.2 NAME	•	
STREET ADDRESS	2958 KENILWICK DR. SO.		1,3 STREET ADDRESS	٠	
CITY-ST-ZIP	CLEARWATER FL 33761		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS	and the first war o		2.3 STREET ADDRESS		
CITY+ST-ZIP			2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE		Change Chyonnon
NAME			3.2 NAME	•	
STREET ADDRESS	,		3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
TITLE			4.2 NAME		
NAME			4.3 STREET ADDRESS		
STREET ADDRESS	;		4.4 CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	,	-	5.2 NAME	<i>,</i> •	
STREET ADDRESS		•	5.3 STREET ADDRESS	•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		-	6.2 NAME		
CTDEET AIVIDERS			6.3 STREET ADDRESS	•	

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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

727-298-8077

**FILED** 

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90099 043 \*\*\*150.00