05-06-1999 90234 027 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

18 HARBOR LAKE CIRCLE

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P92000011937

1. Corporation Name

Principal Place of Business

935 MAIN ST.

OFFICE EXTENSION RESOURCE, INC.

SUITE B-1 SAFETY HARBO	NO FI RAROS	SAFETY HARBOR FL 34695		DO NOT WRITE IN THIS SI	PACE
US				3. Date Incorporated or Qualifed 12/14/1992	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 935 MAIN	1 STREET	59-3156057	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 SuITE B		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 SAFETY HARO	or, FL	Trust Fund Contribution	Added to Fees
Zip	Country			8. This corporation owes the current year Intan	gible
24	25	29 346 <i>95</i> 30	US.	Personal Property Tax.	∐Yes XXNo
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Ag	gent
			81 Name		
DAWSEY, FRED W.			82 Street Addre	ress (P.O. Box Number is Not Acceptable)	
18 HARBOR LAKE CIRCLE			oli col Addit	COS (1.C. DOX Hamber to Hot / Goop to ho)	
SAFETY HARBOR FL 34695			83		
			84 City	FL	85 Zip Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was author	ized by the corporatio	oration submits this statement for the purpose of chan's board of directors. I hereby accept the appointr	nanging its registered ment as registered
SIGNATURE	Signature, typed or printed name of registered agen	A and title if applicable (NOTE: Basis	stered Agent signature required	d when reinstaling) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	DPT		1.1 TITLE		☐ Change ☐ Addition
NAME	DAWSEY, REGINA K	_	1.2 NAME		
STREET ADDRESS	18 HARBOR LAKE CIRCLE		1.3 STREET ADDRESS		
	SAFETY HARBOR FL		1		
CITY-ST-ZIP TITLE	VPS		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
	DAWSEY, FRED W	_	2.2 NAME		
NAME	18 HARBOR LAKE CIRCLE				
STREET ADDRESS	SAFETY HARBOR FL		2.3 STREET ADDRESS		
CITY-ST-ZIP	SAFETT HANDON FL		2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE		<del></del>	3.1 ITILE 3.2 NAME	'	
NAME			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP TITLE			3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4.2 NAME		
			4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE			5.1 TITLE		☐ Change ☐ Addition
NAME		_	5.2 NAME		<del>_</del>
			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE			6.1 TITLE		Change Addition
			6.2 NAME		
NAME		i	6.3 STREET ADORESS		

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 suppliemental 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 chapter 607 or or an attachment with an address, with all other like empowered. FRED DAWSET SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6.4 CITY-ST-ZIP