Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90011 042 \*\*\*150.00

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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P92000014104

1. Corporation Name

Principal P ace of Business

VFA-TIMUQUANA PARTNERS, INC.

3030 HARTLEY ROAD SUITE 100 JACKSONVILLE FL 32257		3030 HARTLEY ROAD SUITE 100 JACKSONVILLE FL 32257				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  12/24/1992
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-3164735 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75 Auditional
22		27				5. Certificate of Status Desired Fee Recuired
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes []No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
	DELL MARK T		i	81	Name	e
	RELL, MARK T. HARTLEY ROAD		ľ	82	Street	et Address (P.O. Box Number is Not Acceptable)
STE			-	83		
JACH	(SONVILLE FL 32257		Į			
			Į	84	City	FI 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statu es, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agen	nt ind title if applicable (NOTI	. Registered	Agent	signature n	re required when reinstating) DATE
12.		E DIRECTORS	13.	_		ADDITICNS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 1111	ι£		☐ Change ☐ Addition
NAME	ROOD, JOHN D		1.2 NA	ME		
STREET ADDRESS	3030 HARTLEY ROAD		1.3 STF	REET	ADDRESS	os l
CITY-ST-ZIP	JACKSONVILLE FL 32257		1,4 CIT	1,4 CITY-ST-ZIP		
TITLE	VST	☐ DELETE	2.1 TIT	2.1 TITLE		VS ⊠ Change ☐ Addition
NAME	FARRELL, MARK		2.2 NA	2.2 NAME		FARRELL, MARK T.
STREET ADDRESS	3030 HARTLEY ROAD		2.3 \$TI	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL.		2.4 CF	2.4 CITY-\$T		JACKSONVILLE, FL 32257
TITLE		☐ DELETE	3 1 TIT	LE.		VT Change X Addition
NAME .			3.2 NA	ME		SMITH, BERNARD E.
STREET ADDRES S			3.3 STF	REET	ADDRESS	3030 HARTLEY ROAD, SUITE 100
CITY-ST-ZIP			34. CI	TY- S1	Γ-ZIP	JACKSONVILLE, FL 32257
TITLE		☐ DELETE	4 1 TIT	LΕ		☐ Change ☐ Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STI	REET	ADDRESS	ss
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP	
TITLE	TILE DELETE		5.1 TIT	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NA	ME		
STREET ADDRESS			53 ST	REET	ADDRESS	SS
CITY-ST-ZIP			54 CIT		-ZIP	
TITLE		☐ DELETE	6.1 TIT			☐ Change ☐ Addition
NAME .			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET	ADDRESS	SS CONTRACTOR OF THE CONTRACTO

14. I hereby certify that the information supplied with this filling 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 a hual 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

CITY-ST-ZIP

MARK T. FARRELL

(904)260-3030