**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000033711

RICHARD G. HATHAWAY, P.A.

10151 DEERWOOD I SUITE 250	PARK BLVD
JACKSONVILLE FL 3	32256
2. Principal Place	

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90023 019 \*\*\*150.00

	·				<del></del>				H1    4   11		
Principal Place of Business Mailing Address											
10151 DEERWOOD PARK BLVD 10151 DEERWOOD PARK BLVD											
SUITE 250  JACKSONVILLE FL 32256  US  SUITE 250  JACKSONVILLE FL 32256  US  US						DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed					
00		•				05/05/1993					
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number	$\neg \top$	App	lied For .		
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.				551165		59-3180836			Not Applicable		
						5. Certificate of Status Desired Serviced Serviced Fee Required					
City & State						6. Election Campaign Financing \$5.00 May					
23 Jack	eksonville, FL 28 Jacksonville			2 FL Trust Fund Contribution Added to Fees				• (			
Zip <b>Z</b> o o o	Country	Zip 29 33 3 5 5	Coun	(JV	7	8. This corporation owes the current year Int	angible Ye:		<b>Z</b> No		
24 322°			30 4		<del></del>	Personal Property Tax.  10. Name and Address of New Registered					
	9. Name and Address of Current	Registered Agent	<del></del>	31	Name	10. Name and Address of New Registered	Agent				
ITAH	HAWAY, RICHARD G										
10151 DEERWOOD PARK BLVD				82	Street Addre	ess (P.O. Box Number is Not Acceptable)					
	TE 250 KSONVILLE FL 32256		]	83							
JACI	NOUNVILLE PL 32200		1	B4	City	FL	85	Zip C	ode		
44 Diversions	to the previous of Costions 607 0503	and 607 1609 Florida Statu	toe the ab		-named come	pration submits this statement for the nurnose of	changi	na its r	egistered		
office or re	registered agent, or both, in the State of im familiar with, and accept the obligation	i Florida. Such change was a	authorized	by t	ine corporatio	n's board of directors. I hereby accept the appoi	ntment	as reg	istered		
SIGNATURE									{		
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS APPLICATIONS APPLICATIONS APPLICATION OF THE PROPERTY OF	ID DIB	ECTOR	9S IN 12		
12.	OFFICERS AND			_	.—	ADDITIONS/CHANGES TO OFFICERS A	□ Ch		Addition		
TITLE	PSTD	C DELETE	1,1 TITL 1,2 NAM		1						
NAME	10151 DEERWOOD PARK BLVD BLDG, 100 STE 250										
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	JACKSONVILLE FL 32256	☐ DELETE		1.4 CITY-ST-ZIP			Ch	nange	Addition		
TITLE	_				}		□ •				
NAME			2.2 NAM						Į		
STREET ADDRESS					ADDRESS						
CITY-ST-ZiP	2.40				I-ZIP		Ch	12006	Addition		
TITLE	DELETE 3.1T				}			ange			
NAME			3.2 NAA								
STREET ADDRESS					ADDRESS				ĺ		
CITY-ST-ZIP		C OCLETE	3.4. CIT		r-ZIP		☐ Ch		☐ Addition		
TITLE	}	☐ DELETE	4.1 TITL						C radius;		
NAME			4. 2 NAJ								
STREET ADDRESS	}				ADDRESS	•					
CITY-ST-ZIP			4.4 CIT		-ZIP		□ Ch		Addition		
TITLE	)	☐ DELETE	5.1 TITL		- 1			iai iye			
NAME			5.2 NAN		*DDDCCC				j		
STREET ADDRESS					ADDRESS				1		
CITY-ST-ZIP			5.4 CIT		-ZIP				Addition		
TITLE	]	. DELETE	6.1 TITL		]		☐ Ch	ange	Addition		
NAME			6.2 NAA						[		
STREET ADDRESS			6.3 STR	EET.	ADDRESS						
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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 on 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 any address, with all other like empowered. 904-996

4-20-55