FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000066253

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

VICK DEVELOPMENT, INC.

Principal Place	of Business	Mailing Address	•			(IMBILIAN LIGHT HING SILVE GOLING AN		,,,,,	1100101	
PO BOX 6199		46 NORTH WASHINGTON BL	VD.				•			•
SARASOTA FL 34278 SUITE 1					- {	DO NOT WRITE IN THIS SPACE				
US SARASOTA FL 34236						3. Date Incorporated or Qualifed				
						09/21/1993				ļ
2 Principal Di	ace of Business	2a. Mailing Address				4. FEI Number			Appl	ed For
	Box 6119	26			ļ	59-3206405		<u> </u>		Applicable
Suite, Apt.		Suite, Apt. #, etc.			-			\$8.7	5 Ad	ditional
22	· · · · · · · · · · · · · · · · · · ·	27	_			5. Certifcate of Status Desired		Fe	e Requ	ired
City & State	9	City & State				6. Election Campaign Financing	. _П	\$5.	<u>00</u> м	ay Be
23		28			ļ	Trust Fund Contribution	· 🛚	Add	led to	Fees
Zip	Country	Zip	Country			8. This corporation owes the curr	ent year Inta			_
24	25	29 3	0			Personal Property Tax.		Yes]No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New F	egistered /	Agent		
0.47	EDOON JOHN		81	Name						
PATTERSON, JOHN				Street	Addres	s (P.O. Box Number is Not Accepta	ible)			
46 NORTH WASHINGTON BLVD.			_							
SUITE 1 SARASOTA FL 34236			83							
SARV	4301A FL 34230		84	City		-		85	Zip Co	de
	to the provisions of Sections 607.0502			'			<u> </u>	44		
agent. Lai SIGNATURE	to the provisions of Sections of Neglistered agent, or both, in the State of maintain with, and accept the obligations of the section of the sec	ions of, Section 607.0505, Florid	a Statutes	٠.	روا من		DATE			
12.	OFFICERS AND	D DIRECTORS .	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRE	CTOR	S IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE			·		[_] Cha	nge	Addition
NAME	VICK, MAURICE M JR		1.2 NAME							ļ
STREET ADDRESS	PO BOX 6119 N/A		1.3 STREE	T ADDRESS	3	•	•			ſ
CITY-ST-ZIP	SARASOTA FL 34278		1.4 CITY- S	T-ZIP						
TITLE	DVPS DELETE 2.1 TI							☐ Cha	nge	☐ Addition
NAME	VICK, CHARLOTTE O		2.2 NAME							
STREET ADDRESS	PO BOX 6119 N/A 233			TADDRESS	;					
-CiTY-ST-ZIP			2.4 CITY-	6T-ZIP						
TITLE		☐ DELETE	3.1 TITLE		-	الميث الدامج سيستند المادانية		Cha	nge	Addition
NAME ,			3.2 NAME							
STREET ADDRESS			3.3 STREE	T ADDRESS	;					
CITY+ST-ZIP_			3.4. C/TY-	ST-ZIP						
TITLE	· —	☐ DELETE	4.1 TITLE					☐ Cha	nge	☐ Addition
NAME			4. 2 NAME							
STREET ADORESS			4.3 STREE	T ADDRESS	3					
CITY-ST-ZIP			4.4 CITY-5	T-ZIP	1					□ Addisi
TITLE		☐ DELETE	5.1 TITLE		1	4		☐ Cha	ıığe	Addition
NAME			5.2 NAME				•			ĺ
STREET ADDRESS			5.3 STREE	T ADDRESS	')					'

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section indicated on this annual report or supplemental annual report is true and accurate and that my signature shall officer or director of the corporation or the receiver or trustee empowered to execute this report as require Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

eme legal effect as if made under oath; that I am an 607, Florida Statutes; and that my name appears in

☐ DELETE

388-4194

orida Statutes. I further certify that the information

☐ Change

☐ Addition