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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000067721

1. Corporation Name

WYATT INVESTMENT GROUP, INC.

Principal Place of Business Mailing Address					, , , , , , , , , , , , , , , , , , , ,					
1405 CENTERVILLE ROAD			1405 CENTERVILLE ROAD							
SUITE 4400		SUITE 4400				DO NOT WRITE IN THIS SPACE				
TALLAHASSEE FL 32302 US		TALLAHASSEE FL 32302 US			3. Date Incorporated or Qualifed					
US		00				09/29/19	•	-		
2 Principal Pi	face of Business	2a. Mailing Address				4. FEI Numb			Api	plied For
	lace of Busiless	26				59-3117			ļ. <u></u>	t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					<u></u>		\$8.75 A	<del>- · · · - {</del>
	n, cto.	27				5. Certifcate	of Status Desired		Fee Re	
City & State		City & State				6 Election C	ampaign Financing	1 —	\$5.00	May Be
23		28					d Contribution	' D	Added t	
Zip	Cour try	Zip	Cou	ntry		8. This corpo	oration owes the cu	rrent year	ntangible	
24	25	29	30				Property Tax.	ĺ	☐ Yes	(ZNo
	9. Name and Address of Curr					10. Name and	d Address of New	Register	ed Agent	
				81 N	ame	_				
	OMS, JEFFREY W			<b>82</b> S	troot Ac	dress (P.O. Box Nu	imber is Not Accer	table)		
1405 CENTERVILLE ROAD SUITE 44		4400		02   3	lieel AC	utess (F.O. DOX 140	Miliper is 1401 veceb	(abic)		
TALL	AHASSEE FL 32308			83						
									1221 20 2	
				<b>84</b> C	ity			F	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508. Florida Si	tatutes, the a	bove-na	amed cc	rporation submits th	his statement for th	e purpose	of changing its	r əgistered
office crrs	egistered agent, or both, in the Sta	ite of Florida. Such change w	as authorized	i by the	corpora	tion's board of cire	ctors. I hereby acc	ept the ap	pointment as reg	g stered
agent. ⊢ai	m familiar with, and accept the obli	igations of, Section 607.0005.	, riorida Stau	iles.						1
SIGNATURE	Signature, typed or printed na ne of registered a	agent and title if applicable.	NOT :: Registered	Agent sig	nature regu	ired when reinstating)		DATE		ì
	organization of the contract o									
12.	OFFICERS	AND DIRECTORS	13.				S/CHANGES TO C		AND DIRECTO	F:S IN 12
TITLE	OFFICERS		13.		$\overline{}$		S/CHANGES TO C		ND DIRECTO	F:S IN 12
······································	DPST	AND DIRECTORS	13.	ΠLE			S/CHANGES TO C			
TITLE NAME	DPST CROOMS, JEFFREY W	ANI DIRECTORS DELETI	13. E 1.1 TI	ΠLE	DRESS		S/CHANGES TO C			
TITLE  NAME  STREET ADDRESS	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	ANI DIRECTORS DELETI	13. E 1.1 TI 1 2 N/ 1.3 S1	TLE ME	l l		S/CHANGES TO C			
TITLE NAME	DPST CROOMS, JEFFREY W	ANI DIRECTORS DELETI	13. E 1.1 TI 12 N/ 1.3 S1 1.4 CI	TLE AME REET ADD	l l		S/CHANGES TO C			
TITLE  NAME  STREET ADDRE 3S  CITY-ST-ZIP  TITLE	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	AND DIRECTORS DELETI	13. E 1.1 TI 12 N/ 1.3 SI 1.4 CI	TLE IME REET ADD TY-ST-ZIF	l l		S/CHANGES TO C		☐ Change	☐ Addition
TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	AND DIRECTORS DELETI	13. E 1.1 TI 12 NV 1.3 ST 1.4 CI E 2.1 TI 2.2 NV	TLE IME REET ADD TY-ST-ZIF	·		S/CHANGES TO C		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	AND DIRECTORS DELETI	13. E 1.1 TI 1.2 NV 1.3 S1 1.4 CI E 2.1 TI 2.2 NV 2.3 S1	TLE  ME  REET ADI  TY-ST-ZIF  TLE  ME  REET ADI	DRESS		S/CHANGES TO C		☐ Change	☐ Addition
TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	AND DIRECTORS DELETI	13. E 1.1 TI 12 NV 1.3 ST 1.4 CI 2.1 TI 22 NV 2.3 ST 2.4 C	TLE  ME  REET ADD  TY-ST-ZIF  TLE  ME  REET ADD  TY-ST-ZIF	DRESS		S/CHANGES TO C		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE 3S  CITY-ST-ZIP  TITLE	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	DELETI	13. E 1.1 TI 12 NV 1.3 ST 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 C	TLE  ME  REET ADI  TY-ST-ZIF  TLE  ME  REET ADI  TY-ST-ZIF  TY-ST-ZIF  TLE	DRESS		S/CHANGES TO C		☐ Change	☐ Addition
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TITLE  NAME  STREET ADORE 3S  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE 3S  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE 3S	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	DELETI	13. E 1.1TI 12 NV 1.3 S1 1.4 CI E 2.1 TI 22 NV 2.3 S1 2.4 C E 3.1 TI 3.2 NV 3.3 S1	TLE  ME  REET ADI  TY-ST-ZIF  TLE  ME  REET ADI  TY-ST-ZI  TLE	DRESS P		S/CHANGES TO C		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S	DELETI	13. E 1.1TI 12 NV 1.3 S1 14 CQ E 2.1 TI 22 NV 2.3 S1 2.4 C E 3.1 TI 32 NV 3.3 S1 34 C	ILE REET ADD ITY-ST-ZIF ILE IME REET ADD ITY-ST-ZI ILE IME ITE IME ITY-ST-ZI ITY-ST-ZI ITY-ST-ZI	DRESS P		S/CHANGES TO C		☐ Change	☐ Addition
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TITLE  NAME  STREET ADORE 3S  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE 3S	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S TALLAHASSEE FL	DELETI	13. E 1.1 TI 12 NV 1.3 SI 1.4 CI 2.1 TI 22 NV 2.3 SI 2.4 C E 3.1 TI 3.2 NN 3.3 SI 3.4 C E 41 TI 4.2 N 4.3 SI	TLE  IME  REET ADI  TY-ST-ZIF  ILE  IME  REET ADI  ITY-ST-ZI  ILE  ITY-ST-ZI  ILE  ITY-ST-ZI  ILE  AME  REET ADI  ITY-ST-ZI  ILE  AME	DRESS P		SICHANGES TO C		☐ Change☐☐ Change☐☐ Change	Addition Addition
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TITLE  NAME  STREET ADORE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRE SS  CITY-ST-ZIP  TITLE  NAME  STREET ADORE SS	DPST CROOMS, JEFFREY W 1405 CENTERVILLE ROAD S TALLAHASSEE FL	DELETI	13. E 1.1TI 12 NV 1.3 S1 1.4 CI E 2.1 TI 22 NV 2.3 S1 2.4 C E 3.1 TI 3.2 NV 3.3 S' 3.4 C 4.1 TI 4.2 N 4.3 S' 4.4 CI E 5.1 TI 5.2 NV 5.3 S' 5.4 G	TLE  ME REET ADI TY-ST-ZIF TLE ME REET ADI TY-ST-ZIF TLE AME REET ADI TY-ST-ZIF TLE TY-ST-ZIF TLE ME REET ADI TY-ST-ZIF TLE TY-ST-ZIF TLE TY-ST-ZIF TLE TY-ST-ZIF TLE TY-ST-ZIF TLE	DRESS P DRESS DRESS		SICHANGES TO C		☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

14. Thereby 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 im 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 a light empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-99

850 877-6212