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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90053 005 ***150.00

i. Corporatio	ASSESSMENT & VOCATION		.		28 - Balan (1918), 1818), 1818), 1818), 1818), 1818)
Principal Plac	ce of Business	Mailing Address			
11573 E. TRUMBULL DR. P.O. BOI		P.O. BOX 5318 SPRING HILL FL 34611-5318	8	DO NOT WRITE IN THI	IS SPACE
				3. Date Incorporated or Qualifed 10/01/1993	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3206621	Not Applicable
Suite, Apt,	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Desired	Fee Required
City & Star	te	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5:00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes the current year in Personal Property Tax.	ntangible ☐ Yes ☐ No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	
EDE	EMANI ALLENIAA		81 Name		
	eman, allen w 73 e. Trumbull dr.		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	ING HILL EL 24600		- Guddinaa	Total (Fig. 20x 142/mbc) to 1404 Acceptable)	
) JFN	34609		83		
			84 City	FI	85 Zip Code
Olifice Olif	to the provisions of Sections 607.050; registered agent, or both, in the State of m familiar with, and accept the obligate	or Fiorida. Such change was au	ithorized by the corporation	poration submits this statement for the purpose of only board of directors. I hereby accept the appo	of observing its registered
SIGNATURE	Signature, typed or printed name of registered agen		Registered Agent signature require	d when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Freeman, allen w				
STREET ADDRESS	11573 E. TRUMBULL DRIVE		1.2 NAME		·
			1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL 34609				
CITY-ST-ZIP TITLE	SPRING HILL FL 34609	☐ DELETE	1.3 STREET ADDRESS		☐ Change ☐ Addition
	SPRING HILL FL 34609 P FREEMAN, JANET L	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY- ST-ZIP		☐ Change ☐ Addition
TITLE	P FREEMAN, JANET L 11573 E. TRUMBULL DRIVE	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	•	☐ Change ☐ Addition
TITLE NAME	SPRING HILL FL 34609 P FREEMAN, JANET L	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME	·	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	P FREEMAN, JANET L 11573 E. TRUMBULL DRIVE	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change ☐ Addition ☐ Change ☐ Addition
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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 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 apprecia, with all other like empowered.

SIGNATURE:

-Allen W. Freeman 2/6/99

(352) 688-4985