Applied For Not Applicable

\$8.75 Additional

Added to Fees

ÐN₀

Fee Required · \$5.00 May Be

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # P9400002233

1. Corporation Name

Principal Place of Business		Mailing Address					
1710 OVERSEA MARATHON FL US		PO.O. BOX 501211 MARATHON FL 33050-1211					
Principal Place of Business 21		2a. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 City & State 28					
City & Star	de						
Zip	Country	Zip Country					
Z,p							

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90178 030 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

Trust Fund Contribution

Personal Property Tax.

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

01/03/1994 4. FEI Number

65-0461344

				Name				
BARTLESON, CAROL M. 1710 OVERSEAS HWY			82	Street	et Address (P.O. Box Number is Not Acceptable)			
MAR	ATHON FL 33050	83						
				City	City FL 85 Zip Code			
office or c	to the provisions of Sections 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Such m familiar with, and accept the obligations of, Section	change was auth	orized by	the com	corporation submits this statement for oration's board of directors. I hereby	r the purpose of accept the appoi	changing its ntment as re	registered gistered
SIGNATURE		wor. D				DATE	·	
	Signature, typed or printed name of registered agent and title if applicable	, (NOTE: Re	13.	t signature	required when reinstating) ADDITIONS/CHANGES TO		D DIRECTO	RS IN 12
12.	OFFICERS AND DIRECTORS	☐ DELETE	1.1 TITLE	·-, ·	ADDITIONS/CHANGES IN	OFFICEING AN	Change	Addition
TITLE	•							
NAME	BARTLESON, ANTHONY R		1.2 NAME					
STREET ADDRESS	1710 OVERSEAS HWY			ADDRESS				
CITY-ST-ZIP	MARATHON FL	C) 05: 575	1.4 CITY-ST	r-zip		· · · · · ·	☐ Change	Addition
TITLE	T	DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	BARTLESON, CAROL M.		2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				_
CITY-ST-ZIP	MARATHON FL		2 4 CITY-S	T-ZIP	The second secon			
TITLE		☐ DELETE	31 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME			4. 2 NAME				·-	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4,4 CITY-ST	Γ-ZIP				
TITLE		DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	Γ- Z!P				
TITLE		☐ DELETE	6.1 TITLE			. 12.	☐ Change	☐ Addition
NAME			6.2 NAME					
			6.3 STREET	ADDRESS				·
STREET ADDRESS			6.4 CITY-ST					
CITY-ST-ZIP	certify that the information supplied with this filing doe	4 4 4 4 4 4 4 4 4 4 4 4			d in Continu 110 07/2\/i) Elected Ctat	iton I further co	tifu that the	information

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 enderess, with all other like empowered.

SIGNATURE: