Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90121 046 \*\*\*150.00

## 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

## DOCUMENT # **P94000010769**

1. Corporation Name

JOHN T. BROWN, P.A.

							i <b>a 4</b>
Principal Place of Business Mailing Address					7 1001100111111111111111111111111111111	11471 44711 144	10 911-0 1411 1501
		126 NE EGLIN PKWY			}		
		FT WALTON BEACH FL 32548	BEACH FL 32548		DO NOT WRITE IN THIS	SPACE	
us us				3. Date Incorporated or Qualifed			
					02/04/1994		- 1
2 0	Land Business	2a. Mailing Address			4. FEI Number	$\overline{}$	Applied For
<del>-</del>	tace of Business	<b>⊢</b> •			59-3227163	<b>⊢</b> —	Not Applicable
Suite Apt # etc. Suite Apt # etc.				39-3227 103		5. Additional	
<del>-</del>	Suite, Apt. #, etc.  Suite, Apt. #, etc.				5. Certifcate of Status Desired		Required
City & Stat	City & State City & State				6. Election Campaign Financing		<b>0</b> May Be
— <sub>1</sub>	28				Trust Fund Contribution		d to Fees
23   Zip			country	,	This corporation owes the current year In		4.0.00
<b>─</b> 1 '	25	29 30			Personal Property Tax.	Yes	□No
24	9. Name and Address of Currer		T		10. Name and Address of New Registered	Agent	
	o. Hame and Medicas C. Carrer		81	Name			
BROWN, JOHN T				<u> </u>			
126 NE EGLIN PKWY			82	Street A	ddress (P.O. Box Number is Not Acceptable)	•	
FT WALTON BEACH FL 32548			83	<del> </del>			
				1			
			84	City	FL	85 Zi	p Code
office or r	egistered agent, or both, in the State	of Florida. Such change was authori	zed by	the corpor	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	changing intment as	its registered registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florida S	tatutes	<b>\$</b> .			
SIGNATURE		WOTE 2			uired when reinstating) DATE		
12.	Signature, typed or printed name of registered age		3.	nt signature rec	ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	D		1 TITLE			Chang	
NAME	BROWN, JOHN T		2 NAME	İ			_
_	126 NE ELGIN PKWY	1		T ADDRESS			[
STREET ADDRESS	FT. WALTON BEACH FL			1			1
CITY-ST-ZIP	FI. WALTON BLACITY		4 CITY-S	1-24	<del></del>	Chang	e Addition
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NAME			2 NAME				į
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NAME		<b>1</b> 4	2 NAME				
STREET ADDRESS		4	3 STREE	TADDRESS			Ì
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TITLE	<b>\</b>		1 TITLE	}		☐ Chang	ge 🗌 Addition
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STREET ADDRESS		9.5	3 STREE	T ADDRESS			
CITY-ST-ZIP			4 CITY-S	ST-ZIP			
TITLE		□ DELETE 6	1 TILE	}		☐ Chang	ge [ Addition
NAME		6	2 NAME	-			•

6.3 STREET AODRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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 address, with all other like empowered.