Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90061 006 \*\*\*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 # P94000022610

1. Corporation Name

KENNETI	h w. Trussell, D.C., P.A.					
Principal Place	of Business	Mailing Address				T 20015801 210 FOLLO BUREL BOSTO MOTIVE DATE DESIGNATION STOLO BUREL BOST HON
113 W. ROBERT BRANDON FL 3: US	rson St.	113 W. ROBERTSON ST BRANDON FL 33511 US				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 03/17/1994
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				<b>59-3240278</b> Not Applicable
Suite, Apt. #	#, etc.	. Suite, Apt. #, etc.				5. Certificate of Status Desired  5. Serviced  5. Service
22	<u> </u>	27				ree Required
City & State	•	City & State				6. Election Campaign Financing \$5.00 May Be
23		28	0			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible  Personal Property Tax. Ves   No
24	25		0		<del></del>	Personal Property Tax. LYTYes No.  10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent		81	Name	
TRUS	SSELL, KENNETH W					
113 W. ROBERTSON ST				82	Street A	t Address (P.O. Box Number is Not Acceptable)
	NDON FL 33511			83		
				84	City	FL 85 Zip Code
l office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was aut	nonzea	Dy 1	tne corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agen		legistered	Agen	t signature re	required when reinstating) DATE
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE	D	☐ DELETE	1.1 111			
NAME	TRUSSELL, KENNETH W		1.2 NA			
STREET ADDRESS	113 W. ROBERTSON ST.		1.3 ST	REET	ADDRESS	;
CITY-ST-ZIP	BRANDON FL		1.4 CF		r-ZIP	
TITLE		☐ DELETE	2.1 TIT	ΓLE		☐ Change ☐ Additio
NAME			2.2 NA	ΜE		
STREET ADDRESS	 		2.3 ST	REET	ADDRESS	<b>;</b>
CITY-ST-ZIP			2.4 C	_	T-ZIP	Change Addition
TITLE		☐ DELETE	3.1 TIT			
NAME			3.2 NA			
STREET ADDRESS			3.3 ST	REET	ADDRESS	3
C/TY-ST-ZIP			3.4. CI		T-ZIP	☐ Change ☐ Additio
TITLE	- •	☐ DELETE	4.1 TF		1	Criange [] Addition
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	<b>3</b>
CITY-ST-ZIP		ET au sus	4.4 CI		r-zip	Change Additio
TITLE		DELETE	5.1 TI			Change C Addition

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



☐ DELETE

☐ Change

Addition