Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90169 011 \*\*\*150.00

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000025616

1. Corporation Name

Principal Flace of Business

DELAINO & TAYLOR PROPERTIES, INC.

1025 7TH ST. UNIT 1 CEDAR KEY FL 32625		P.O. BOX 209 CEDAR KEY FL 32625				DO NOT WRITE IN THIS SPACE						
US							corporated or Qualifed					
2 Principal Di	lace of Business	2a. Mailing Address				4. FEI N					An	lied For
2. Principal Place of Business					1	59-3:237902			-	<del></del>	Applicable	
21 Suite, # pt. #, etc.		Suite, Apt. #, etc.			<u></u>	313UC			\$8		dditional	
22		27			5. Certifo	ate of Status Desired					quired	
City & State	е	City & State					n Campaign Financing Fund Contribution					May Be Fees
Zip	Country	Zip	Cour	ntry		8. This co	orporation owes the curr	ent vear	Intar	- naible		
24	25	29	30			<b>I</b>	al Property Tax.	,		_ Yes		<b>X</b> INo
	9. Name and Address of Curre		1			10. Name	and Address of New F	Register	d A	gent		
				81	Name					_		
DELAINO, WILLIAM E JR. 1025 7TH ST.				82	Street A	idress (P.O. Bo	ress (P.O. Bo ( Number is Not Acceptable)					
UNIT				83								
CED	AR KEY FL 32625		ļ							T= -		
				84	City			F	Ί	85	Zip C	ode
office or re	to the provisions of S∋ctions 607.05 egistered agent, or bcth, in the State m familiar with, and a cept the oblig	e of Florida. Such change was	autnonzed	ו עם	ine corpor	ation's board of	directors. I hereby accep	ot the ap.	oint	ment	as req	istered
SIGNATURE	Signature, typed or printed name of registered ag-	en and title if applicable (NO)	E: Registered	Agent	signature req	ured when reinstating		DATE				
12.	OFFICERS A	NI) DIRECTORS	13.			ADDITI	ONS/CHANGES TO OF	FICERS				
TITLE	P	☐ DELETE	1.1 TH	LE						Cha	ange	Addition
NAME	DELAINO, WILLIAM E JR		1.2 NA	ME								
STREET ADDRESS	1025 7TH ST UNIT 1		1.3 ST	REET	ADDRESS							
CITY-ST-ZIP	CEDAR KEY FL		14 CIT		- ZIP							
TITLE	VP	☐ DELETE	2.1 TIT	LE						[] Cha	ange	Addition
NAME	TAYLOR, RONNIE F		2.2 NA	ME	İ							
STREET ADDRESS	16333 ANDREWS CIR		2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	CEDAR KEY FL		2. 4 CI		T-ZIP					-10		
mle	S	☐ DELETE	3.1 TIT	lE	ŀ					☐ Cha	ange	☐ Addition
NAME	DELAINO, PEGGY		3.2 NA									
STREET ADDRESS	1025 7TH ST UNIT 1				ADDRESS							
CITY-ST-ZIP	CEDAR KEY FL		3.4. Cf		r-zyp					Cha	ange	Addition
TITLE	VP	☐ DELETÉ	4.1 TIT								ariy <del>o</del>	Addition
NAME	TAYLOR, DIANA		4. 2 NA		. Donest							
STREET ADDRESS	16333 ANDREWS CIR				ADDRESS							
CITY-ST-ZIP	CEDAR KEY FL	☐ DELETE	4.4 CIT	_	-ZIP					Chi	ange	Addition
TITLE		C Derete		LE						الله ب	90	
NAME			■ 57NA	ME	J							
STREET ADDRE 3S			5.2 NA 5.3 ST		ADDRESS							
			5.3 ST	REET	ADDRESS							
CITY-ST-ZIP		□ DELETE		REET							ange	Addition
CITY-ST-ZIP TITLE NAME		☐ DELETE	5.3 ST 5.4 CIT	REET IY-ST						☐ Cha	ange	☐ 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.

6.4 CITY-ST-ZIP