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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000035772 (0)

ARCHITECTURAL CONCEPTS OF ORLANDO INC

Principal Place of Business Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



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|--|---|--|----------------|---|--|--------------|------------------|----------------|
| 6320 EDGE O GROVE CIRCLE ORLANDO FL 32819 | | 6320 EDGE O GROVE CIRCLE ORLANDO FL 32819 | | | | | | |
| 0,121,00 | 2 320.0 | ONDAIDO FE DEDIS | | | DO NOT WRITE | IN THIS SPA | 4CE | |
| | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | 05/10/1994 | | | |
| 2. Principal Place of Business 28. Mailing Address | | | | | 4. FEI Number | | A | Applied For |
| 21 | | 26 | | | 59-3225155 | | - | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | \$8.75 | Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Ш | Fee F | Required |
| City & State | е | City & State | | | 6. Election Campaign Financing | | \$5.00 |) May Be |
| 23 | | 28 | | | Trust Fund Contribution | | | to Fees |
| Zip | Country | Zip | Coun | lry | 8. This corporation owes or has pai | d the currer | ıt year Ir | ntangible |
| 24 | 25 29 30 | | | Personal Property Tax due June 30. Yes No | | | | |
| | 9. Name and Address of Curren | nt Registered Agent | | | 10. Name and Address of New Reg | stered Ag | ent | |
| 0' | TOOLE, BRIAN | | 8 | 1 Nan | me | | | |
| 6320 EDGE O GROVE CIRCLE | | | | 2 Stre | eet Address (P.O. Box Number is Not Acceptable | (a) | | |
| ORLANDO FL 32819 | | | | | edi Address (i .o. box faditiber is fadi Addeptab | 10) | | Í |
| | | | Ē | 3 | | | ~ ~~~ | |
| | | | <u>_</u> | | | | | |
| | | | E | 4 City | у | FL | B5 Zip | Code |
| 11. Pursuant t | to the provisions of Sections 607.050 | 2 and 607 1508. Florida Stat | tutes, the abo | I .ve-nam | ned corporation submits this statement for the n | | anning | ite registered |
| office or re | egistered agent, or both, in the State | of Florida. Such change wa | s authorized | by the c | ned corporation submits this statement for the procorporation's board of directors. I hereby accep | t the appoin | Iment as | s registered |
| agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE | Signature, typied or printed name of registered age | and title if semigrable A | OTC Pagistand | cont sions | vature required when reinstaling) | DATE | | |
| 12. | ····· | D DIRECTORS | 13. | igen signa | ADDITIONS/CHANGES TO OFFICE | | RECTO | BS IN 12 |
| TITLE | VP | DELETE | 1.1 TITL | : | 11001110107011/4102010 01110 | | Change | Addition |
| NAME | O'TOOLE, S ANDRA | | 1.2 NAM | | | _ | | |
| STREET ADDRESS | 6320 EDGE O GROVE CIRC | F | | et addres | 200 | | | ł |
| CITY-ST-ZIP | ORLANDO FL | - - | | | .50 | | | ľ |
| TITLE | P | DELETE | 2.1 1111 | - \$1 - ZIP : | | · · | Change | Addition |
| NAME | O'TOOLE, BRIAN | | 2.2 NAM | | | | Change | |
|] | 6320 EDGE O GROVE CIRCI | E | | | | | | |
| STREET ADDRESS | ORLANDO FL | LC | | ET ADDRES | | | | |
| CITY-ST-ZIP TITLE | ONLARDO FL | ☐ DELETE | | - \$1 - ZIP | | | Change | Addition |
| | | occ.1 | 3.1 TITLI | | | <u>.</u> | Unange | ☐ Addition |
| NAME | | | 3.2 NAM | | ĺ | | | |
| STREET ADDRESS | | | | et addres | | | | |
| CITY-ST-ZIP | | Deterr | | -ST-ZIP | | · - | | |
| TITLE | | ☐ DELET e | 4.1 1lTLI | | | L | Change | ☐ Addition |
| NAME | | | 4. 2 NAN | | | | | |
| STREET ADDRESS | | | 4.3 STRE | et addres | SS | | | |
| CITY-ST-ZIP | | | 4.4 CITY | | | | | |
| TITLE | | ☐ DELET e | 5.1 TITLE | | | | Change | Addition |
| NAME | | | 5.2 NAM | : | | | | |
| STREET ADDRESS | | | 5.3 STRE | ET ADDRES | ss | | | j |
| CITY-ST-ZIP | | | 5.4 CITY | ST-ZIP | 1 | | | |
| TITLE | | DELETE | 6.1 TITLE | | | | Change | ☐ Addition |
| NAME | | | 6.2 NAM | | | | | |
| STREET ADDRESS | | | | ET ADDRES | ss | | | |
| CITY-ST-ZIP | | | 6.4 CITY | | | | | |
| U | | | 04 6117 | OLLTIL | | | | |

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 60 an attachment with an address