Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90061 002 ***158.75

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 # P9400036104

| 1. Corporation Name | | | | | | | | |
|--|---|---------------------|--------------------|--------------|---|------------------|---|--|
| PAHK PL | ACE OF DUNEDIN, INC. | | | | (1001100) 112 20111 B1011 B0211 B0111 90111 B0100 2111 |) | (() 6 (6) (36) | |
| <u> </u> | | | | | | | | |
| Principal Place | e of Business | Mailing Address | | | F SOMETIMAL LICAL SPAIN DESIGNAMENT ABOUT AND | | | |
| 541 PARK STREET 541 PARK STREET | | | | | | | | |
| DUNEDIN FL 34 | | DUNEDIN FL 34698 | * | | DO NOT WRITE IN THIS SI | PACE | _ | |
| | | ¥ | • | • | 3. Date Incorporated or Qualifed | | | |
| | | • | | | 05/09/1994 | | } | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number | Appli | ed For | |
| 21 | | 26 | | | 59-3255047 | | Applicable | |
| Suite Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Ad | | |
| 22 | | 27 | | | | Fee Requ | | |
| City & State | 9 | City & State | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | |
| Zip | Country | Zip | _ Countr | у | 8. This corporation owes the current year Intan | | ٠ | |
| 24 | 25 | 29 30 . | | | (ordertary rem | | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name | | | | | | | | |
| MILLS, JOHN V | | | | | | | | |
| 541 PARK STREET | | | 82 | 2 Street Add | dress (P.O. Box Number is Not Acceptable) | | | |
| DUNEDIN FL 34698 | | | 83 | 3 | | | | |
| | • | .e. | . L | | | | | |
| | | | 84 | 4 City | FL | 85 Zip Co | de } | |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508-Florida Statutes; the above-named corporation submits this statement for the purpose of changing its registered | | | | | | | | |
| 11. Pursuant to the provisions of Sections (III/1910) and (III/191 | | | | | | | | |
| SIGNATURE | , | | | | | | { | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required | | | | | ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND | DIPECTOR | S IN 12 | |
| 12. | OFFICERS AND DIRECTORS DELETE | | 13. | | | Change | Addition | |
| NAME | MILLS, JOHN V | 1.2 NA | | l l | | - • | _ } | |
| STREET ADDRESS | 541 PARK ST | | | ET ADDRESS | | | ĺ | |
| CITY-ST-ZIP | *************************************** | | 1.4 CITY- | | | | | |
| TITLE | SVP | ☐ DELETE | 2.1 TITLE | | | Change | Addition | |
| NAME | | | 2.2 NAME | | | | | |
| STREET ADDRESS | | | 2.3 STREE | ET ADORESS | | | Į. | |
| CITY-ST-ZIP | | | 2. 4 CITY- | ~ | | -10t- | □ Address: | |
| TITLE | _ | | 3.1 TITLE | | | Change | Addition | |
| NAME | | | 3.2 NAME | 1 | | | - | |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- \$T-ZIP | | | Change | Addition | |
| TITLE (| | | Ę. | - | | | ===== | |
| STREET ADDRESS | | | | ET ADDRESS | | | 1 | |
| CITY-ST-ZIP | | | 4.4 CITY- | | | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Change | Addition | |
| NAME | | | 5.2 NAME | . | | | 1 | |
| STREET ADDRESS | | | | ETADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY- | | | Charit | | |
| TITLE | | ☐ DELÉTE | 6.1 TITLE | ŧ | • | ☐ Change | Addition | |
| NAME | • | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STRE | ET ADDRESS | | | J | |

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

SIGNATURE:

CITY-ST-ZIP