FILED

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90011 032 ***150.00

Mailing Address

3030 HARTLEY RD.

SUITE 100

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000048227

1. Corporation Name

Principal Place of Business

3030 HARTLEY RD.

SUITE 100

VESTCOR PLANTATION I, INC.

JACKSONVILLE	FL 32257	JACKSONVILLE FL 32257						DO NOT WRITE IN THIS SPACE							
								3	3. Date In	corporated	or Qualife	b			
									06/28	/1994					
2. Principal Pl	lace of Business		2a. Mailing A	Address				4	i. FEI Nur					Apı	lied For
21			26						59-32	560 <u>77</u>				Not	Applicable
Suite, Apt.	#, etc.		Suite, Ap	ot. #, etc.					Cortifo	ite of Statu	e Decired				dditional
22			27					3), Geroica	ile di Siaiu	is Desiled		F	ee Re	uired
City & State	e		City & St	tate				6	. Election	Campaig	n Financing	, 🗆	\$5	.00	May Be
23			28						Trust F	und Contril	bution		Ac	dded to	Fees
Zip	Cou	ntry	Zip			Country		8	3. This co	rporation o	wes the cu	rrent year Int	angible		
24	25		29		30				Persona	al Property	Tax.		☐ Ye	s	[]No
	9. Name and Ad-	dress of Current	Registered Age	ent				10), Name a	and Addre	ss of New	Registered	Agent		
						81	Nam	e							
	RELL, MARK T.					82	Ctros	t Acdress ((B.O. Box	Number is	Not Accer	itable)			
3030 HARTLEY ROAD						02	Stree	K ACUIESS ((F,O. 60x	Mumber is	NOI Accep	itable)			
STE 100						83									- -
JA.CI	KSONVILLE FL 322	257													
						84	City					FI	85	Zip C	ode
44 Diverse	to the provisions of S	2 ations 607 0502	and 607 1508 E	Florida Statu	ites the	e above	-name	d corporation	on submit	s this state	ment for th		changi	na its	r egistered
office crr	anistered saent or h	o hi in the State o	f Florida, Such c	nange was:	HUDOU	zea by :	tne coi	poration's t	board of c	irectors. I I	hereby acc	ept the appoi	ntment	as reg	stered
agent. I ar	m familiar with, and a	cept the obligati	ons of, Section 6	307.0505, FI	orida S	Statutes.									
SIGNATURE												DATE			
	Signature, typed or printed in			(NOT		tered Agen	t signatur	e required when		NC/CHAN	ICES TO O	FFICERS AN	חום חום	ECTO	S IN 12
12.	nn	OFFICERS AND		DELETE		.1 TITLE		$_{ op}$	ADDITIO	INSICHAN	1000	FEIGENS /IN			Addition
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NAME.	ROOD, JOHN D		_			.2 NAME									
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TITLE	VST		ĺ	DELETE	2.	.1 TITLE		VS					X C	ange	Addition
NAME	Farrell, Mark	Τ.				2 NAME		F	•	MARI					
STREET ADDRE 3S	3030 HARTLEY F	RD STE 100			2.	3 STREET	ADDRES	s 3030) HAR	TLEY	ROAD	, SUIT	E 1	00	
CITY-ST-ZIP	JACKSONVILLE	FL			2.	. 4 CITY-S	T-ŽIP	JACK	SONV	ILLE	, FL	32257	'		
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NAME !					3.	2 NAME		SMIT	CH, B	ERNA	RD E.				
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CITY-ST-ZIP					3	8.4. CITY-S	T-ZIP	JACK	SONV	ILLE	, FL	32257			
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NAME					4	. 2 NAME									
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NAME															
STREET ADDRESS					6	3.3 STREET	ADDRES	×8							

SIGNATURE:

CITY-ST-ZIP

MARK T. FARRELL

6.4 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 recuired 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 a lighter like empowered.

4-23-99

(904)260-3030

Daytime Phone #