

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

99 MAR 11 PM 2:04
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 794000084444
 1. Corporation Name
 The Emerald Pointe Corporation
 39602 Amethyst Way
 Zephyrhills, FL 33540

Principal Place of Business Mailing Address
 39602 Amethyst Way 39602 Amethyst Way
 Zephyrhills, FL 33540 Zephyrhills, FL 33540

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
 11/14/1994

2. Principal Place of Business 2a. Mailing Address
 21 SAME 26 SAME
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 27
 City & State City & State
 23 28
 Zip Country Zip Country
 24 25 Pasco 29 30 Pasco

4. FEI Number Applied For
 59-3288074 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
 David Peterson
 39630 Chancy Rd.
 Zephyrhills, FL 33540

10. Name and Address of New Registered Agent
 81 Name Herb Fiss
 82 Street Address (P.O. Box Number is Not Acceptable)
 15310 Amberly Drive
 83
 84 City Tampa FL 85 Zip Code 33647

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
 SIGNATURE *[Signature]* DATE 03/09/99

12. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------------------|
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|--|
| 1.1 TITLE | PO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | David Peterson |
| 1.3 STREET ADDRESS | 39602 Amethyst way |
| 1.4 CITY-ST-ZIP | Zephyrhills, FL 33540 |
| 2.1 TITLE | VPO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | Robert Riskie |
| 2.3 STREET ADDRESS | 39602 Amethyst way |
| 2.4 CITY-ST-ZIP | Zephyrhills, FL 33540 |
| 3.1 TITLE | STO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | Deidra L. Bryant |
| 3.3 STREET ADDRESS | 39602 Amethyst way |
| 3.4 CITY-ST-ZIP | Zephyrhills, FL 33540 |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | 300000281199- - 6 |
| 4.3 STREET ADDRESS | -03/18/99--0193--011 |
| 4.4 CITY-ST-ZIP | ***150.00 ***150.00 |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 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 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.

SIGNATURE: *[Signature]* DAVID PETERSON - 8205 2/22/99 /815/ 788-2145

CORPORATION 1414100