COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Sep 13, 1999 8:00 am Secretary of State

09-13-1999 90004 032 ***550.00

OCUMENT # paannon84945

Corporation	n Name	70000	/してきてし								
KIMBERL	Y M. SHEPARD,	P.A.									
	-						F LEAD LOCAL LIFE AND IN COLUMN				
incipal Place	of Business		Mailing Address				. (129);est to tout also estit			#168 . g.m. 1441	
	DRANGE AVE		600-20 NORTH ORA								
ST UNION BANK TOWER FIRST UNION BANK TOWE ANDO FL 32801 ORLANDO FL 32801 US							DO NOT WRITE IN THIS SPACE				
				•			3. Date Incorporated or Qualified				
							11/17/1994				
Principal Pl	ace of Business	_	2a. Mailing Addres				4. FEI Number		A	pplied For	
Post (Price Box	3625	26 POST OF	rea	Box	3525	59-32814 <u>1</u> 2		N	ot Applicable	
Suite, Apt.			Suite, Apt. #, 6	etc.		. نوست حسم جاس	5. Certificate of Status Desired	d 🔲	•	Additional equired	
City & State City & State					-	-	6. Election Campaign Financing Trust Fund Contribution \$5.00 May B Added to Fees			May Be	7
Occano Fluction 28 Occanor			VPa.	Fu	SETOR	to Fees				_	
Zip	Countr	•	Zip		Cou		8. This corporation owes the o			- .	
3290		<u> </u>	29 32802	\ :	30	U. S.A.	Intangible Personal Propert		Yes	_ No	4
	9. Name and Addre	ss of Current I	Registered Agent			81 Name	10. Name and Address of Ne	w Registerea	Agent		\dashv
SHEP	ARD, KIMBERLY M.	PΑ									
	O NORTH ORANGE					82 Street Add	dress (P.O. Box Number is Not Acce	eptable)			
FIRST UNION BANK TOWER				}	83					1	
	NDO FL 32801									- I:	4
-,					- 1	84 City		FL	85 Zîp	Code	1
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Pursuant	to the provisions of sec	tions 607.0502 a	and 607.1508, Florida	Statutes	, the abo	ove-named corp	oration submits this statement for the	nurpose of ch	nanging its r	egistered	\dashv
- Pursuant	registered agent, or hott	h in the State of	f Florida, Such chand	ie was al	ithorized	t by the corporal	oration submits this statement for the tion's board of directors. I hereby ac	nurpose of ch	nanging its r	egistered egistered	
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IGNATURE:

Or supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oldin, that it 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.

IGNATURE:

9/7/99 (407) 423 -/0/0

IGNATURE:

(407)423-1010