

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90211 004 ***150.00

DOCUMENT # P94000086048

1. Corporation Name

THE SPEAKS/ELLIS GROUP, INC.

Principal Place of Business

**1641 EAGLE NEST CIR
WINTER SPRINGS FL 32708
US**

Mailing Address

**1641 EAGLE NEST CIR
WINTER SPRINGS FL 32708
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/1994

2. Principal Place of Business

2a. Mailing Address

21 6241 Rustling Oaks Dr

26 Suite, Apt. #, etc.

**22 City & State
23 Agoura Hills CA**

27 City & State

24 Zip 91301 25 Country USA

29 Zip 30 Country

4. FEI Number

52-1856209

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

**SPEAKS, JERRY F
711 OVERLOOK WAY
WINTER SPRINGS FL 32708**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **SPEAKS, JERRY F.**
STREET ADDRESS **1641 EAGLE NEST CIR**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **V** ☐ DELETE
NAME **ELLIS, DEBRA**
STREET ADDRESS **11704 CAMDEN RD**
CITY-ST-ZIP **WILLIAMSPORT MD 21795**

TITLE **P** ☐ DELETE
NAME **ROBINSON, JOHN**
STREET ADDRESS **127 WHITECAPS CIR**
CITY-ST-ZIP **MAITLAND FL 32751**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Jerry & Kara Speaks ☒ Change ☐ Addition
6241 Rustling Oaks Dr
Agoura Hills CA 91301

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30

Date

301-223-9087

Daytime Phone #

CR2E034 (11/98)