## 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

DOCUMENT # PGF

SAUARE

Principal Place of Business Mailing Address 2700 HADREY TALLHASSEC. F

1	, 0-0-0		
2. Principal Place of Business	2a. Mailing Address		
1	26		
Suite, Apt. #, etc.	Suite, Apt #, etc	c.	
2	27		
City & State	City & State		
3	28		
Zip Country	Zip	Country	
25	29	30	

9. Name and Address of Current Registered Agent

219 D. DEWMAN SUITE 400

STEPHEN G. MAUNING

JACKSONVILLE, TL 32202

FILED

99 MAR -4 AM 9: 26

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

	4. FEI Number 59-33 06027	Applied For Not Applicable	
	5. Certificate of Status Desired [ ]	\$8.75 Additional Fee Required	
	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
	B. This corporation owes the current year I Personal Property Tax.	ntangible ∷]Yes ∏No	
	10. Name and Address of New Registere	d Agent	
Name	TACK QUICK		
	dress (P.O. Box Number is Not Acceptable)		

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, and accept the appointment as registered agent.

81 Name

82

83

84 City

agent. I ar	n ramiliar with, and accept the bollgations of, Section 607,0505, Flori	da Statutes.		
SIGNATURE	Signature, you or printed name of registerior Spent and title (*applicable (NOTE I	Registered Agent signature re	equired when reinstating: DATE	4 1999
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PRES DELETE	1.1 TITLE		[ ] Change
NAME	STANLEY STEELE	1.2 NAME	900002739	87992
STREET ADDRESS	ZOOI MICCOSUREE ROAD	1.3 STREET ADDRESS	-03/05/93	-01120013
CITY-ST-ZIP	TAMAHAKSEE TL 32308	14 CITY-ST-ZIP	****158,75	5 ****15 <b>8.7</b> 5
TITLE	SEC + TRES DELETE	21 TITLE		[_] Change [_] Addition
NAME	Tom QUICK	2.2 NAME		
STREET ADDRESS	2700 HADLEY ROLD	23 STREET ADDRESS		
CITY-ST-ZIP	TALLAHANSEE, TL 32305	2 4 CITY-ST-ZIP		
TITLE	V P □ DELETE	31 TITLE		[]] Change []] Addition
NAME	JACK QUICK	3.2 NAME		
STREET ADDRESS	ZYDO HANRY ROAD	33 STREET ADDRESS		
CITY-ST-ZIP	TAMANAGET FL 32308	34 CITY-S1-ZIP		
TITLE	☐ DELETE	4.1 TITLE		[   Change
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		44 City-ST-ZIP		
TITLE	☐ DELETE	51 TITLE		[ ] Change
NAME		52 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-2IP		
TITLE	☐ DELETE	6.1 TITLE		[ ] Change [ ] Addition
NAME		62 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
l		SACITY OF TID		

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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



MAR4,1999 (BSD) 567 Z413