

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
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90105 004 ***150.00

DOCUMENT # P95000006401

1. Corporation Name

DIANE CHRISTIE BACCUS HORSLEY, P.A.



Principal Place of Business

25 W NEW HAVEN AVE
SUITE C
MELBOURNE FL 32901

Mailing Address

25 W NEW HAVEN AVE
SUITE C
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/23/1995

4. FEI Number

59-3291423

Applied For

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

2. Principal Place of Business

21 1900 SOUTH HARBOUR CITY BLVD.

2a. Mailing Address

26 P.O. Box 33572

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 126

27

City & State

23 MELBOURNE

City & State

28 India Land

Zip

24 32901

Country

25 FLORIDA

Zip

29 32903

Country

30 FLORIDA

9. Name and Address of Current Registered Agent

BACCUS HORSLEY, DIANE C

25 W NEW HAVEN AVE

SUITE C

MELBOURNE FL 32901

10. Name and Address of New Registered Agent

81 Name

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

83 SUITE 126,

84 1900 SOUTH HARBOUR CITY BLVD.

City MELBOURNE

FL

85 Zip Code

32901

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

Diane Baccus Horsley, President/Registered Agent

1/10/99

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 D BACCUS HORSLEY, DIANE C ☐ DELETE

NAME 25 W NEW HAVEN AVE SUITE C

STREET ADDRESS 1900 S. HARBOUR CITY

CITY-ST-ZIP MELBOURNE FL 32901 Blvd., Suite 126

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 P/S/D ☐ Change ☐ Addition

1.2 NAME BACCUS HORSLEY, DIANE

1.3 STREET ADDRESS SUITE 126, 1900 SOUTH HARBOUR CITY BLVD.

1.4 CITY-ST-ZIP MELBOURNE, FLORIDA 32901

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:

Diane Baccus Horsley, President

1/10/99

(407) 8727-9888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0108446