FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1 Corporation Name



DOCUMENT # P95000006787

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90223 042 ***150.00

510/512	HOLDINGS, INC				
Principal Place	e of Business	Mailing Address			fi Dasia Britt foan, rêftii 1001 toet
3620 85 STREET 8620 85 STREET VERO BEACH FL 32966 VERO BEACH FL 32966				DO NOT WRITE IN THI	S SPACE
	•			3. Date Incorporated or Qualifed 01/23/1995	
2 Principal P	lace of Business	2a. Mailing Address	 _	4. FEI Number	Applied For
z, Filiticipai Fi		26		65-0596577	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6; Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	
4	25 USA	29 30	USA	Personal Property Tax.	Yes No
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Registere	d Agent
MOL	ILICH IONN I ID		81 Name		
MCHUGH, JOHN J JR 333 17 STREET SUITE U			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
VERO BEACH FL' 32960					
			83		
			84 City	F	
11. Pursuant office or r agent a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation	2 and 607.1508, Florida Statutes, of Florida. Such change was auth tions of, Section 607.0505, Florida	the above-named co orized by the corpora a Statutes.	proration submits this statement for the purpose ation's board of directors. I hereby accept the app	or changing its registered ointment as registered
SIGNATURE	organized by the state of segistered age	n and und I applicable. (NOTE: Re	gistered Agent signature requ		
12.	. OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE $igcup$	r D	☐ DELETE	1	PRES /DIRECTOR	Change Addition
NAME	DAVIS, JACK L	•	1.2 NAME		
STREET ADDRESS	8620 85 STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32966	Dec 875	1.4 CITY+ST-ZIP	<u></u>	☐ Change ☐ Addition
TITLE		☐ DELETE	2.1 TITLE		□ ousude □ vectuor.
NAME '	, ,		2.2 NAME	•	
STREET ADDRESS			2.3 STREET ADDRESS		}
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE		DELETE 2	3.2 NAME		
NAME		:			}
STREET ADDRESS			3.3 STREET ADDRESS	,	
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
NAME			4.2 NAME		
		:	4.3 STREET ADDRESS		}
STREET ADDRESS			1		.]
CITY-ST-ZIP TITLE		DELETÉ	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME	`		5.2 NAME		
STREET ADDRESS	,		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	}	_	6.2 NAME)
STREET ADDRESS			6.3 STREET ADDRESS		}
~/LL://UD!/LOG	I				

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: