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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P95000014891

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Jun 21, 1999 8:00 am Secretary of State

06-21-1999 90006 039 ***550.00

ROLL WITH IT INVESTMENTS, INC.									
Principal Place	of Business	Mailing Address				1 10011001 110 10101 01111 0311		1011 57257 72770	3101 1101 11001
11385 MOTOR YACHT DR. N 11385 MOTOR YACHT DR. N									
JACKSONVILLE FL 32225 JACKSONVILLE FL			25			DO NOT V	RITE IN THIS	SPACE	
					3 [Date Incorporated or Qualit	_	<u> </u>	
					I	02/22/1995			-
2 Principal Pl	ace of Business	2a. Mailing Address				El Number	_		olied For
21	ace of Edamess	26 1635 Ludlo	un R	4		59-3313207			Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	2122	£1				\$8.75	dditional
22		27			5. (Certifcate of Status Desired		Fee Re	quired
City & State	e	City & State		_	6. E	Election Campaign Financi	ng 🔲	\$5.00	May Be .
23	<u></u>	28 Marco Islan	·d	FC		rust Fund Contribution		Added to	> Fees
Zip	Country	Zip	Country		8. 1	his corporation owes the	current year Int		д.,
24	25	29 34145 30	[Col	lier		Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent	81	Name	10. l	Name and Address of Ne	w Kegistered	Agent	
MCCUME WILLIAM C ID				Name					
MCCUNE, WILLIAM C JR 11385 MOTOR YACHT DR. N.			82	Street A	Address (P.C	D. Box Number is Not Acc	eptable)		
	KSONVILLE FL 32225		83				_		
JACI	GOWILLE I'L GEEES		63						
			84	City			FL	85 Zip (ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the									registered
office of r	onistored agent or both in the State of	r Florida. Such change was autho	onzea ov	me corbo	corporation : tration's boa	rd of directors. I hereby a	cept the appoi	ntment as re	jistered
agent, I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes						+
SIGNATURE	Signature, typed or printed name of registered agent a	AND W. Winstelle MOTE: Box	ristand Agan	t signatura re	equired when rein	nstation)	DATE		\
12.	OFFICERS AND		13,	it aignature re		DDITIONS/CHANGES TO		ID DIRECTO	RS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE					Change	Addition
NAME	MCCUNE, WILLIAM C JR		1.2 NAME			•			
STREET ADDRESS	11385 MOTOR YACHT DR N		1.3 STREET	ADDRESS	1635	Ludlow Rd			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-S		Marco		3414	5	
TITLE		DELETE	2.1 TITLE					Change	☐ Addition
NAME	·								
STREET ADDRESS			2.2 NAME						
CITY-ST-ZIP		_	2.2 NAME 2.3 STREET	ADDRESS					
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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: