FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90129 021 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000016339

1. Corporation Name

ALL PRO	FESSIONAL INVESTIGATION	INS, INC.					
					_	ik ikaka alkaa likea iikka	
Principal Place		Mailing Address					
616 N. HIGH ST Deland Fl 327		616 N. HIGH STREET DELAND FL 32720					
DELIAND TE SEA	,,,,	OLDING IL VLIEV			DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualifed		1
					02/28/1995	1	
2. Principal Pl	ace of Business	2a. Mailing Address	•		59-3296841 59-329694	Applied Not App	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Addition	onal
22	<u>·</u>	27			5. Certificate of Status Desired	Fee Require	bd _
City & State	e	City & State			6. Election Campaign Financing	\$5.00 May	
23		28			Trust Fund Contribution	Added to Fee	es
Zip	Country	Zip	Countr	у	8. This corporation owes the current year I	ntangible □Yes □N	io I
24	9. Name and Address of Currer		30		Personal Property Tax. 10. Name and Address of New Registered		-
	3. Maine and Address of Carrel	it registered Agent	81	Name			
COL	LIER, THOMAS W JR ES		82	Ctroot Adde	ress (P.O. Box Number is Not Acceptable)		
	n spring garden RD Ste 11	5	0.	Street Addit	ess (F.O. Box Number is Not Acceptable)		
	E 100		8:	3)
DEL	AND FL 32720		84	City		85 Zip Code	
	·			<u> </u>	F		
l office or n	edistered agent, or both, in the State.	of Florida. Such change was aut	norized b	/ the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as register	red
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	da Statute	S.			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if continoble (NOTE: E	Partietared An	ent signature require	d when reinstating) DATE		\
12.		ID DIRECTORS	13.	on agradad	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS I	N 12
TITLE	Р	☐ DELETE	1.1 TITLE			☐ Change ☐	Addition
NAME	VORHIS, SUZANNE A		1.2 NAME	ĺ			ĺ
STREET ADDRESS	616 N HIGH ST		1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	DELAND FL 32720		1.4 CITY-	ST-ZIP			7 4 4 4 4 4 4 4 4
TITLE		☐ DELETE	2.1 TITLE		,	Change	Addition
NAME	,	•	2.2 NAME		• •	~ .	l
STREET ADDRESS			1	ET ADDRESS)			
CITY-ST-ZIP		☐ DELETE	2. 4 CITY- 3.1 TITLE	31-AF		☐ Change ☐	Addition
NAME	· 		3,2 NAME				}
STREET ADDRESS			1	ET ADDRESS			}
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE	1111	☐ DELETE	4.1 TITLE			☐ Change ☐	Addition
NAME			4. 2 NAME	:			}
STREET ADDRESS			4,3 STRE	ET ADDRESS			ļ
CITY-ST-ZIP	<u> </u>	F-1	4.4 CITY-		·-	Change [7 Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	1	, •	Change	Addition]
NAME				ET ADDRESS	£4.		ì
			5.3 STRE				.
	C all	☐ DELETE	6.1 TITLE			Change	Addition
""E = 1221	MICHAEL CHROCK HER CO.	,	I	1			-)

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CONTROL DEVIATION ASSE

NAME

STREET ADDRESS

CITY-ST-ZIP

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P95000016339 (0)

ALL PROFESSIONAL INVESTIGATIONS, INC.

444808-90129-21 P95000016339



							DRVIE NOVEL ORS	D) ((B)4. BISAN	
Principal Place of Business Mailing Address									
616 N. HIGH STREET			616 N. HIGH STREET						
DELAND FL 32720			DELAND FL 32720				- Ta- 13-	ite of Last F	Journal
						3. Date lacerporated or Qualifier 02/28/1995	(f 38.1)	ite or Last i	ероп
2. Principal Plac	ce of Business	28.	Mailing Address			4. FEI Number		<u> </u>	Applied For
21	_	26				59-3296941			Not Applicabl
Suite, Apt. #.	, etc. Cote	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		Fee	5 Additional Required
City & State			City & State			6. Election Campaign Financing			May Be
23	_	28				Trust Fund Contribution			d to Fees
Zip	Country		Zip	Country		8. This corporation has liability for Florida Statutes	orintanginie. ′es ∐No	tax finaer s	199.002,
24	25	29		30		10. Name and Address of New		d Agent	
	9. Name and Address of Co	urrent Regist	ered Agent	81	Name	TO. Halle and Address St. Vis.	,		
							-1.1-1	· <u>·</u>	
	rook, Paul N			82	Street Addr	ess (P.O. Box Number is Not Accept	table)		
	SEVENTH STREET			83					
SUITE 1				["					
FORT L	AUDERDALE FL 33301			84	City		FI		ip Code
			- 1500 Ft ::- Ft-1	tue the above ti	amort corpor	ation submits this statement for the p	alroved of c	banging its	registered offi
					nration's boar	ation submits this statement for the a d of directors. Thereby accept the a	ppointment a	is registere	d agent. Lam
	a fillight, or nous at the orese a.								
familiar with	n, and accept the obligations of.	Section 607.0	0505, Florida Statutes	S.					
Tamiliar With	т, яли ассерстве овядатовь ос	CHR (IICH) CROY A	ornar, rasaan oanasa	S. OTE Projected Agen		d calum reportings)			
SIGNATURE	knature, lyped or bunked nature of registers	Each of and filling a	g g dec sal de a til de		Ladinativo codmis	g calon resistancy) ADDITIONS/CHANGES TO O		ID DIRECTO	DRS IN 12
Tamiliar With	knature, lyped or bunked nature of registers	CHR (IICH) CROY A	g g dec sal de a til de	OTE में grafered Agen	Ladinativo codmis	d calum reportings)		D DIRECTO	DRS IN 12
SIGNATURE	kindore, typed or build again of requires OFFICER	Each of and filling a	goderatilo ita TORS	OTE 12 gradered Agen	I зарание содыес Б	g calon resistancy) ADDITIONS/CHANGES TO O	FHCLRS AN	ID DIRECTO	DRS IN 12 Addition
SIGNATURE	n, and accept the duligations of requires OFFICER	Each of and filling a	goderatilo ita TORS	OF Proposers Agent 13. 1, 1 011 F	I зарабио кодине Е	ADDITIONS/CHANGES TO O	FHCLRS AN	DIRECTO	DIS IN 12
SIGNATURE	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	goderatilo ita TORS	OTE R gistered Agent 13. 1, 1 DTE 12 NAME	ADORESS	ADDITIONS/CHANGES TO O	FHCLRS AN	(Change	□ Addilion
SIGNATURE 5 12. HHE HAME STREEL ADDRESS CHY SU-ZIP	Received Special Confidence of Engineers OFFICERS D VORHIS, SUZANNE A	Each of and filling a	goderatilo ita TORS	OTE 12 gradered Agree 1 13. 1, 1 DTLF 1.2 NAME 1.3 STRCL	E ADDRESS	ADDITIONS/CHANGES TO O P/D Willis, Suzanne	FRICEIRS AN	D DIFFECTO Change	□ Addilion
SIGNATURE 5 12. THE DAME STREEL ADDRESS CITY SU-ZIP HILE	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	i produkti i i i i i i i i i i i i i i i i i i	13. 1,1 UTF 12 NAME 1,3 STREET 1,4 CHY S	E ADDRESS	ADDITIONS/CHANGES TO O P/D Willis, Suzanne	FRICEIRS AN	(Change	□ Addilion
TAINHAI WIN SIGNATURE 5 12. THE HAME STREEL ADDRESS CHY SU-ZIP THEE NAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	i produkti i i i i i i i i i i i i i i i i i i	13. 1, 1 011F 12 NAME 1.3 STREEL 1.4 CHY S 2.1 UILE	Corporative conjunct Final Authorities Corporation Final Authorities Corporation Final Authorities Fin	ADDITIONS/CHANGES TO O P/D Willis, Suzanne O Willis, E. Walte	FIICLIS A	(Change	□ Addilion
SIGNATURE 5 12. DIFE DAME SUBSELADDRESS CITY SU-7IP THEF NAME SUBLET ADDRESS	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	i produkti i i i i i i i i i i i i i i i i i i	OTE P gelsset Age! 13. 1, 1 UTF 1.2 NAME. 1.3 STREET 1.4 CHY S 2.1 UTE 2.2 NAME.	ADDRESS 6	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE 5 12. THE HAME STREEL ADDRESS CITY ST-ZIP HILE HAME STREEL ADDRESS CITY ST-ZIP CITY ST-ZIP CITY ST-ZIP CITY ST-ZIP CITY ST-ZIP	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	i produkti i i i i i i i i i i i i i i i i i i	OTE 12 geograf Agent 13. 1.1 DTF 1.2 NAME 1.3 STRUT 1.4 GHY S 2.1 DTF 2.2 NAME 2.3 STRUE 2.3 STRUE 2.3 STRUE 2.3 STRUE 2.4 STRUE 2.4 STRUE 2.4 STRUE 2.5 STRUE 2.5 STRUE 2.5 STRUE 2.5 STRUE 3.5 STR	ADDRESS 6	ADDITIONS/CHANGES TO O P/D Willis, Suzanne O Willis, E. Walte	ricins A	(Change	Addition
SIGNATURE 12. THE DAME STREEL ADDRESS CHY SU-ZIP THE HAME SIBLEL ADDRESS CHY-SI-ZIP THE THE THE THE THE THE THE TH	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	icyleratio IEEE	OTE 12 geograf Agent 13. 1.1 DTF 1.2 NAME 1.3 STREET 1.4 GHY S 2.1 DTF 2.2 NAME 2.3 STREET 2.4 CHY.S	ADDRESS 6	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE 5 12. THE DAME STREEL ADDRESS CHY SU-ZIP HULE HAME STRIEL ADDRESS CHY-SU-ZIP HULE HAME HULE HAME HAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	icyleratio IEEE	OTE 11 optional Agent 13. 1, 1 DTE 1.2 NAME 1.3 STRULT 1.4 GHY S 2.1 DTE 2.2 NAME 2.3 STRUE 2.4 CHY S 3.1 TILLE	ADDRESS 6 CT 21P	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE 5 12. THE DAME STREEL ADDRESS GRY SU-ZIP HUE HAME STRIEL ADDRESS GRY-SIN-ZIP	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	icyleratio IEEE	13. 1, 1 DHF 1 2 NAME 1.3 STRUT 1.4 GHY S 2 1 THE 22 NAME 23 STRUE 24 CHY S 3 1 THE 32 HAME	ADDRESS COLUMN ADDRESS COLUMN	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE 5 12. THE DAME STREET ADDRESS CHY SU-ZIP HULE HAME STREET ADDRESS CHY-SU-ZIP HULE HAME STREET ADDRESS CHY-SU-ZIP HULE HAME HAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	icyleratio IEEE	13. 1.1 DHF 1.2 NAME 1.3 STREET 1.4 CHY S 2.1 THE 2.2 NAME 2.2 STREET 2.4 CHY S 3.1 THE 3.2 HAME	ADDRESS COLUMN ADDRESS COLUMN	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE T2. THE DAME SUBSELADDRESS CHY SU-ZIP HUE NAME SUBJELADDRESS CHY-SIN-ZIP THE SUBJELADDRESS CHY-SIN-ZIP HAME SUBJELADDRESS CHY-SIN-ZIP HUE SUBJELADDRESS CHY-SIN-ZIP HUE	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFFICIE OFFICIE OFFICIE OFFICIE OFFICIE	13. 1.1 DHF 1.2 NAME 1.3 STRELL 1.4 GHY S 2.1 DHE 2.2 NAME 2.3 STRELE 2.4 CHY S 3.1 THE 3.2 STAME 3.3 STREET 3.4 GHY S	ADDRESS COLUMN ADDRESS COLUMN	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE T2. THE HAME STREEL ADDRESS CHY SU-ZIP HULE HAME STRIEL ADDRESS CHY-SI-ZIP HAME STRIEL ADDRESS CHY-SI-ZIP HAME STRIEL ADDRESS CHY-SI-ZIP HILE HAME HAME HAME HAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFFICIE OFFICIE OFFICIE OFFICIE OFFICIE	13. 1, 1 011F 12 NAME, 1.3 STRELL 1.4 CHY S 2 1 1011F 22 NAME, 23 CHREL 24 CHY S 3 1 TRUE 33 STREEL 34 CHY S	ADDRESS 1-7/P	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition
SIGNATURE T2. THE HAME SIRELANDRESS CHYST-ZIP HUE HAME SIRIELANDRESS CHY-ST-ZIP HUE HAME SIRIELANDRESS CHY-ST-ZIP HUE HAME SIRIELANDRESS CHY-ST-ZIP HUE HAME SIRIELANDRESS CHY-ST-ZIP HUE HAME SIRIELANDRESS	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFLETE OFLETE OFLETE OFLETE OFLETE	13. 1, 1 011F 12 NAME, 1.3 STRELL 1.4 CHY S 2 1 1011F 22 NAME, 23 CHRET 24 CHY S 3.1 TRUE 3.2 HAME 3.3 STREEL 3.4 CHY S	ADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition
SIGNATURE 12. THE THE STREEL ADDRESS CHY SU-ZIP HILE HAME STRIEL ADDRESS CHY-SI-ZIP HAME STRIEL ADDRESS CHY-SI-ZIP HAME STRIEL ADDRESS CHY-SI-ZIP HILE HAME HAME HAME HAME HAME HAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFFICIE OFFICIE OFFICIE OFFICIE OFFICIE	OTE P gedsset Agent 13. 1, 1 DITE 1 2 NAME 1.3 STRELL 1.4 CHY S 2 TUILE 22 NAME 73 STRELL 24 CHY-S 3 TRUE 32 CHAME 33 STRELL 34 CHY-S 4 TUILE 42 NAME 4.3 STREEL	ADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition
SIGNATURE T2. THE HAME STREEL ADDRESS CHY SU-ZIP HULE HAME STRIEL ADDRESS CHY-SI-ZIP HAME STREEL ADDRESS CHY-SI-ZIP HAME STREEL ADDRESS CHY-SI-ZIP HILE HAME STREEL ADDRESS CHY-SI-ZIP HILE HAME STREEL ADDRESS CHY-SI-ZIP	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFLETE OFLETE OFLETE OFLETE OFLETE	13. 1.1 DHF 1.2 NAME 1.3 STREET 1.4 CHY S 2.1 THE 2.2 NAME 2.2 STREET 2.4 CHY S 3.1 THE 3.2 STREET 3.4 CHY S 4.1 THE 4.2 NAME 4.3 STREET 4.1 CHY S	ADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS LADDRESS	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition
SIGNATURE T2. THE HAME SIRELANDRESS CHYST-ZIP HUF HAME SIRELANDRESS CHY-ST-ZIP HUF HAME SIRELANDRESS CHY-ST-ZIP HUF HAME SIRELANDRESS CHY-ST-ZIP HUF HAME SIRELANDRESS CHY-ST-ZIP HUME SIRELANDRESS CHY-ST-ZIP	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	OFLETE OFLETE OFLETE OFLETE OFLETE	OTE P gedsset Agent 13. 1, 1 DITE 12 NAME 1.3 STRELL 1.4 CHY S 2 TUILE 22 NAME 23 STREET 24 CHY S 3 TRUE 32 HAME 33 STREET 4 TUILE 42 NAME 4.3 STREET 4.1 CHY S 5 TUILE	ADDRESS I ADDRESS	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition
SIGNATURE 12. THE TIME STREEL ADDRESS CHY ST-ZIP HUE HAME STRIEL ADDRESS CHY-ST-ZIP THE TIME TIME TIME TIME TIME TIME TIME TIM	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filled a	DELETE DELETE DELETE DELETE DELETE	13. 1, 1 DHF 12 NAME 1.3 STBELL 1.4 CHY S 2 TUHE 22 NAME 23 STBELE 24 CHY S 3 TRUE 32 PLAME 33 STBELE 34 CHY S 4 TUHE 42 NAME 43 STBELE 44 CHY S 5 TUHE	ADDRESS I ZIP ADDRESS I ADDRESS I TIP	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition Addition
SIGNATURE 12. THE HAME STREEL ADDRESS CHY SU-ZIP HULE HAME STRIEL ADDRESS CHY-ST-ZIP HULE HAME STRIEL ADDRESS CHY-ST-ZIP HULE HAME STREEL ADDRESS CHY-ST-ZIP HULE HAME STREEL ADDRESS CHY-ST-ZIP HULE HAME STREEL ADDRESS CHY-ST-ZIP HULE HAME	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	OFLETE OFLETE OFLETE OFLETE OFLETE	13. 1.1 DHF 1.2 NAME 1.3 STRELL 1.4 GHY S 2.1 THE 22 NAME 23 CHRE 24 CHY S 3.1 THE 32 NAME 3.3 STREEL 34 CHY S 4.1 THE 42 NAME 4.2 NAME 4.3 STREEL 4.1 CHY S 5.1 THE 5.2 NAME 5.1 THE 5.2 NAME 5.1 STREEL	ADDRESS I ZIP ADDRESS I ADDRESS I TIP	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition Addition
SIGNATUFIE 12. THE HAME STREELADDRESS CHY SU-ZIP HULE HAME STRIELADDRESS CHY-ST-ZIP HULE HAME STRIELADDRESS CHY-ST-ZIP HULE HAME STREELADDRESS CHY-ST-ZIP	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	DELETE DELETE DELETE DELETE DELETE	13. 1.1 DHF 1.2 NAME 1.3 STRELL 1.4 GHY S 2.1 THIF 22 NAME 23 CHRET 24 CHY S 3.1 THUE 32 NAME 3.3 STREEL 3.4 CHY S 4.1 THE 4.2 NAME 4.3 STREEL 4.1 CHY S 5.1 THUE 5.2 NAME 5.3 NAME 5.3 NAME 5.4 CHY S	ADDRESS I ZIP ADDRESS I ADDRESS I TIP	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition Addition
SIGNATURE 12. THE DAME SIRELADDRESS CHY-SL-ZIP HULE HAME SIRELADDRESS CHY-SL-ZIP HULE	D VORHIS, SUZANNE A 616 N. HIGH STREET	Each of and filling a	DELETE DELETE DELETE DELETE DELETE	13. 1.1 DITE 1.2 NAME 1.3 STRELL 1.4 GHY S 2.1 DITE 2.2 NAME 2.3 STREET 2.4 CHY S 3.1 TITLE 3.2 NAME 4.2 NAME 4.3 STREET 4.1 DITE 4.2 NAME 4.3 STREET 5.1 DITE 5.2 NAME 5.1 DITE 5.2 NAME 5.1 DITE 5.2 NAME 5.1 DITE 5.4 CHY S 6.1 DITE	ADDRESS L-ZIP ADDRESS L-ZIP ADDRESS L-ZIP ADDRESS L-ZIP ADDRESS L-ZIP ADDRESS L-ZIP	ADDITIONS:CHANGES TO O P/D Willis, Suzanne Willis, E. Walte	ricins A	Change Change	Addition Addition Addition

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the subject 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.