

FILE NOW: FILING FEE AFTER MAY 1 IS ~~\$225.00~~ ^{550.00}

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90041 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT **1996-1999**

FLORIDA DEPARTMENT OF STATE
 Sandra B. Motham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P95000041514 (7) ✓**

1. Corporation Name
ROSALYN RAE TALL, P.A.



Principal Place of Business *New address* Mailing Address

~~810 ALVARADO PL
 LADY LAKE FL 32159~~ ~~810 ALVARADO PL
 LADY LAKE FL 32159~~

21	2. Principal Place of Business	2a	2a. Mailing Address
	533 Chula Vista Ave		533 Chula Vista Ave
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
	Lady Lake Fla		Lady Lake Fla
24	Zip	29	Zip
	32159		32159
25	Country	30	Country
	Lake		Sumter

3.	Date Incorporated or Qualified	3a.	Date of Last Report
	05/26/1995		1998
4.	FEI Number		Applied For
	59-3325694		Not Applicable
5.	Certificate of Status Desired		\$8.75 Additional Fee Required
	<input type="checkbox"/>		
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
	<input type="checkbox"/>		
8.	This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent

TALL, ROSALYN RAE
~~810 ALVARADO PL~~
~~LADY LAKE FL 32159~~
 941 Soledad Way
 Lady Lake, FL 32159

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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 officer 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: *Rosalyn R Tall* DATE: *4/29/99*

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	TALL, ROSALYN RAE	
STREET ADDRESS	810 ALVARADO PL <i>533 Chula Vista Ave</i>	
CITY - ST - ZIP	LADY LAKE FL 32159 <i>Lady Lake Fla 32159</i>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	NAME	
1.3	STREET ADDRESS	
1.4	CITY - ST - ZIP	
2.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2	NAME	
2.3	STREET ADDRESS	
2.4	CITY - ST - ZIP	
3.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2	NAME	
3.3	STREET ADDRESS	
3.4	CITY - ST - ZIP	
4.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2	NAME	
4.3	STREET ADDRESS	
4.4	CITY - ST - ZIP	
5.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2	NAME	
5.3	STREET ADDRESS	
5.4	CITY - ST - ZIP	
6.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2	NAME	
6.3	STREET ADDRESS	
6.4	CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Rosalyn R Tall Pres* DATE: *4/29/99* 352-753-2270