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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 18 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1. Corporation WEBB	n <b>Na</b> me	# P950 WESTMENTS		137 (S	))				 		
Principal Place of Business Mailing Address									- I ROGINTAL ILO LONDL ANIN ABENL DANIN BANIL DATE A	<b>ade</b> diial (1886 i	illik 1804 IBDA
15894 129TH ROAD MCALPIN FL 32062				HOUTE 1. BOX 896- 15894 129+16. MCALPIN FL 32062			th				
U\$									DO NOT WRITE IN THIS	3 SPACE	
									3. Date Incorporated or Qualified 05/30/1995		
<del></del> ;	lace of Busin	ness	28	2a. Mailing Address					4, FEI Number	<b>—</b>	Applied For
Suite Ant # etc				Suite, Apt. #, etc.					59-3347788	4	Not Applicable
Suite, Apt. #, etc.				27					5. Certificate of Status Desired		Additional Required
City & State				City & State				6, Election Campaign Financing		May Be	
23				28					Trust Fund Contribution	,	to Fees
Zip		Country	<del></del>	Zip	С	ountry	,		8. This corporation owes or has paid the c		
24		25 29 30				Personal Property Tax due June 30. Yes No					
		and Address of C	urrent Regi	stered Agent					10. Name and Address of New Registered	J Agent	
DECKER, ANDREW J III						81	Name				
320 WHITE AVENUE						82 Street Addre			ss (P.O. Box Number is Not Acceptable)		
LIVE OAK FL 32080						100					
						83					
						84	City		FI	<b>85</b> Zip	Code
agent. I ar SIGNATURE	m <b>fam</b> iliar wi	ions of Sections 60 lent, or both, in the th, and accept the	obligations o	f, Section 607.0505,	, Florida Si	tatutes	S. 		oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing upointment as	its registered s registered
12.		OFFICER	S AND DIRE	CTORS	13	3,			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	D			☐ DELET <b>É</b>	1.1	TITLE				Change	Addition
NAME	DUNNAM, SYLVIA W			1 129th Rd		NAME					
STREET ADDRESS	AACALOUL CL BOOOD			4 129 100		1.3 STREET ADDR					ļ
CITY-ST-ZIP		V FL 32062		D priese		CITY-S	T-ZIP				
TITLE	D weep r	NULLID		☐ DELETE		TITLE				Change	Addition
NAME	WEBB, F	HFIELD DRIVE			1	NAME					ļ
STREET ADDRESS		R CO 80301					2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE		<u></u>		DELETE		TITLE	S1 - ZIP			Change	Addition
NAME						NAME				onlings	
STREET ADDRESS							ADDRESS .				
CITY-ST-ZIP						. CITY-S	1				
TITLE	···	······································		DELETE		TITLE	// LN			Change	☐ Addition
NAME					4. 2	NAME					İ
STREET ADDRESS					4.3	STREET	ADDRESS				
CITY-ST-ZIP					4.4	CITY-S1	r-zip				
TITLE				☐ DELETE	5.1	TITLE				Change	Addition
NAME					5.2	NAME					
STREET ADDRESS					5.3	STREET	ADDRESS				
CITY-ST-ZIP					5.4	CITY-S	T-ZIP				
TITLE				DELETE		TITLE				Change	Addition
NAME						NAME	Ì				
STREET ADDRESS					6.3	STREET	ADDRESS				ì

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.

6.4 CITY - ST - ZIP