## May 07, 1999 8:00 am Secretary of State

05-07-1999 90008 048 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000048994

1. Corporation Name							
ONE GRAND, INC.							
					I REGITERA PIR TRIBA BIAN RENIX BRIAN REPUBLICA		18111 8181 1881
Principal Place of Business Mailing Address						i 81001 10110 10110	TRUIT RIBI IBBI
10518 FORT GEORGE RD 10518 FORT GEORGE RD							
JACKSONVILLE FL 32226 JACKSONVILLE FL 32226							
us us					DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualifed		
					06/19/1995		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21	<del></del>				<del>59-3363846</del>		t Applicable
Suite Apt.	uite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	1
22	-				J. Commond of Galace Posmod	Fee Re	quired
	City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution	Added t	o Fees
Zip	Country Zip Cou			У	8. This corporation owes the current year In		_
24	25	29 36	<u> </u>		Personal Property Tax.		□No
1	9. Name and Address of Current	Registered Agent		41 57	10. Name and Address of New Registered	Agent	
CALIDDY CHADLES L. ID				1 Name			
GAUDRY, CHARLES L JR				2 Street Add	dress (P.O. Box Number is Not Acceptable)		
10518 FORT GEORGE ROAD							
JACKSONVILLE FL 32202			8:	3			
				4 City		85 Zip C	Code
				.,,	FI	_   00	
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 office 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. La	egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	onzed b a Statute	y tne corporat s.	ion's board or directors, i hereby accept the appo	iniment as reç	Jistered
SIGNATURE	_						
	Signature, typed or printed name of registered agent a			ent signature requir	ed when reinstating) DATE		
12.	OFFICERS AND		13.	1	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	VD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	KNIGHT, ROBERT		1.2 NAME				
STREET ADDRESS	10518 FORT GEORGE ROAD		1.3 STREI	ET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32226		1.4 CITY-	ST-ZIP			
TITLE	VD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	van Winkel, Robert		2.2 NAME				
STREET ADDRESS	10518 FORT GEORGE ROAD		2.3 STREE	ET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32226		2. 4 CITY-	ST-ZIP			
TITLE	PSTD	☐ DELETE 3.1 π				Change	☐ Addition
NAME :	GAUDRY, CHARLES L JR		3.2 NAME				
STREET ADDRESS	10518 FORT GEORGE ROAD		3.3 STREE	ET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32226		3.4. CITY-	ST-ZIP			
TITLE	VD	☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME	MUYRES, DAVID		4. 2 NAME	:			
STREET ADDRESS	10518 FORT GEORGE ROAD		4 3 STREE	ET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32226		4.4 CITY-	ST-ZiP	,		j
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS			1
C(TY-ST-ZIP			5.4 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**SIGNATURE:** 

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

Addition