## 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 # P95000067926

1. Corporation Name

ABERNATHY ENTERPRISES, INC.

## FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90039 030 \*\*\*150.00



Principal Place	of Business	Mailing Address						110 110 10	
10211 FRANKIE ST. JAMES CITY	=	10211 FRANKIE LANE DRIVE ST. JAMES CITY FL 33956				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	_		
-						09/01/1995			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			
21	<u> در سند. سترست معتومه چند د</u>	26				65-0610825	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip			intry		8. This corporation owes the current year Ir	_	<b>□</b> 1		
24 25		29 30				Personal Property Tax.			
	9. Name and Address of Current	Registered Agent		04	<b>A</b> l	10. Name and Address of New Registered	Agent		
ADEC	MATHY EDNECT C			81	Name				
	RNATHY, ERNEST G				Street Address	ress (P.O. Box Number is Not Acceptable)			7
	1 FRANKIE LANE DRIVE								
ŞI. J	IAMES CITY FL 33956			83					
				84	City		85 Z	ip Code	
	<u> </u>	<u> </u>	··· = .	]=-  =	<sub>a</sub> ç ₹ '03'			ite registe	red
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
	Signature, typed or printed name of registered agent		_	Agent	signature required v	ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN	12
12.	OFFICERS AND	DELETE	13.	TI E		ADDITIONS/CHANGES TO CITTOERIO	Chan		ddition
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NAME	ABERNATHY, ERNEST G		1.2 N						
STREET ADDRESS	10211 FRANKIE LANE DRIVE				ADDRESS				) }
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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 chapped, or on an attachment with an address, with all other like empowered.

SIGNATURE: <