Feb 22, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT

1. Corporation	& METZGER, P.A.	J00727 9 6					
Principal Place	of Business	Mailing Address			(131(18) (18)819) 61111 68111 68111	ii 881:1 19919 11811 19919	10101 1211 1201
204 SOUTH MO	NROE STREET	204 SOUTH MONRO	e street				
SUITE 200 SUITE 200					DO NOT WRITE IN	THIS SPACE	
TALLAHASSEE	FL 32301	TALLAHASSEE FL 32	2301		Date Incorporated or Qualifed	THIO OF ACE	
					09/20/1995		
		2a. Mailing Address	Mailing Address		4. FEI Number	[plied For
21		26			59-3329920		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	C.		5. Certificate of Status Desired	\$8.75 A Fee Re	I
22		27 City & State			O Floring Compaign Financian		
City & State	е	⊢¬ ′			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added-t	
23 Zin	Country		Cour	try	8. This corporation owes the current y		
Zip		— ·	30)	Personal Property Tax.	ear intangible ☐ Yes	□No
24	9. Name and Address of Cu	29	[30]		10. Name and Address of New Regis		
	5. Italio and Address of the			81 Name			
TILTO	ON, ERIC B		Ļ				
204 SOUTH MONROE STREET			82 Street	Address (P.O. Box Number is Not Acceptable)			
SUITE 200			ŀ	83			
	AHASSEE FL 32301		L				
				84 City		FL 85 Zip C	Code
44 5	to the provisions of Sections 607	0502 and 607 1508 Florida	Statutes the ah	ove-named	corporation submits this statement for the purp	ose of changing its	registered
office or re agent. I a	egistered agent, or both, in the S m familiar with, and accept the ot	tate of Florida, Such change.	was authorized	hy the corn	oration's board of directors. I hereby accept the	appointment as re	gistered
office or re agent. I a	egistered agent, or both, in the Sim familiar with, and accept the ob-	tate of Florida. Such change bligations of, Section 607.050 d agent and title if applicable.	was authorized 5, Florida Statu (NOTE: Registered /	by the corp les.	required when reinstating)	ATE	gistered
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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 changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP