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

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90140 026 ***150.00

DOCUMENT # **P95000078642**1. Corporation Name

DARBYSHIRE CREIGHTON HOLDINGS, INC.

Principal Place of Business Mailling Address								EELL TOUES BELLVI IN	981 IBIIU BIII	I ÉIRIO HON FEON
600 BYPASS DE		600 BYPASS DR								
SUITE 210	•	SUITE 210								
CLEARWATER FL 34624 CLEARWATER F			FL 34624	. 34624			DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed 10/01/1995			
2. Principal Pl	ace of Business	2a. Mailing A	ddress				4. FEI Number .		A	Applied For
21		26					59-3377627		N N	tot Applicable
Suite, Apt.	#, etc.	Suite, Apt	, #, etc.				5. Certifcate of Status Desired			Additional Required
City & State	٥	City & Sta	ate				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		•	to Fees
Zip	Country	Zip		Country	y		8. This corporation owes the cur	rent vear Inta	ngible	
24 337	64 [25]	29 337	64	30			Personal Property Tax.	•	Ŭ Yes	□No
24, 22.	9. Name and Address of Currer						10. Name and Address of New	Registered A	gent	
	_			81	N	ame				
BADGER, BERKLEY					, ,	treet Addre	ess (P.O. Box Number is Not Accept	able)		
600 BYPASS DR			82	"	ueet Addre	(1.0. Dox Hanger is Not Accept	<i>abi</i>			
	E 210			83	3					
CLEA	ARWATER FL 34624			-					loc Zic	Codo
				84		ity		FL	85 Zip	Code 764
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such ch	nange was au	uthorized by	/ the	amed corpo corporation	oration submits this statement for the n's board of directors, I hereby acce	purpose of one purpose of the appoint	hanging it tment as r	s registered egistered
	Signature, typed or printed name of registered age		(NOTE.		nt sigr	nature required	when reinstating)	DATE		
12.		ID DIRECTORS	3	13.			ADDITIONS/CHANGES TO OF	FICERS ANI		
TITLE	D	L) DELETE	1.1 TITLE					☐ Change	Acquition
NAME	BADGER, BERKLEY C			1.2 NAME						
STREET ADDRESS	324 WESTGATE RD			13 STREE	TADD	DRESS				
CITY-ST-ZIP	TARPON SPGS FL 34689			1.4 CITY-S	ST-ZIP	·				- Addition
TITLE		L	DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	TADO	DRESS				
CITY-ST-ZIP				2.4 CITY-5	ST-ZII	P				
TITLE		i_] DELE TE	3.1 TITLE			٠.	٠. ســ	Change	Addition
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE		1				
CITY-ST-ZIP			DELETE	3.4. CITY-S	ST-ZII	Р -			Change	e
TITLE		L	J DELE : E	4.1 TITLE					Gliange	Addiabil
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE					•	
CITY-ST-ZIP			DELETE	4.4 CITY-S	ST-ZIP	<u> </u>			☐ Change	Addition
TITLE		_	1 NETE IE	5.1 TITLE 5.2 NAME					change	
NAME				5.3 STREE		WESS				
STREET ADDRESS				5.4 CITY-S			•			
CITY-ST-ZIP		Г	DELETE	6.1 TITLE					Change	Addition
TITLE		_	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6.2 NAME						
NAME				63.STREE		ORESS				

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP