FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90066 017 ***150.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000079307

Principal Place of Business

NAME

STREET ADDRESS

J. RICHARD KIRN & ASSOCIATES INC.

#I THAIL 34231		SARASOTA FL 34231				DO NOT WOLLS IN T	ue en	MACE		
							115 5P	ACE	—-	
						•				
2. Principa Place of Business			2a. Mailing Address			4. FEI Number		\top	Applie	ed For
		26				65-0611471		Ш	Not A	pplicable
#, etc.		⊢	, etc.			5. Certificate of Status Desired	,			
e						6. Election Campaign Financing		\$5.6	00 14:	av Be
		28				Trust Fund Contribution				• 1
Cour	try	Zip		Country		8. This corporation owes the current year				
25		29	30			Persor al Property Tax.		Yes		No
9. Name and Add	ress of Curren	Registered Agent					d Ag	ent_	—-	
L DIOLLADO				81	Name	e				
7061 S. TAMIAMI TRAIL				82	Street	et Ac dress (P.O. Box Number is Not Acceptable)				
ASOTA FL 34231				83			-			
				84	City		1	85 2	²ip C ɔc	e
to the provisions of Sa	ctions 607 060	and 607 1508 Flor	ida Statutes th	e above	-named	d or reporation submits this statement for the purpose	of cha	anging	its re	gistered
egistered agent, or bo	th, in the State of	f Florida. Such char	ige was ₃uthori	zed by	the corp	poration's board of directors. I hereby accept the ap	ointm	ent a	s reg s	tered
m familiar with, and ac	cept the obligat	ions of, Section 607.	uous, Fiorida S	statutes						
Signature, typed or printed na	ne of registered agen	I and title if applicable	(NOT E: Regist	tered Ager	it signature	e required when reinstating) DATE				
.,				13.		ADDITIONS/CHANGES TO OFFICERS	AND	DIREC	STORE	3 IN 12
P			DELETE 1	.1 TITLE] Char	ige	☐ Addition
KIRN, J. RICHARD)		1 1	2 NAME						
7061 S. TAMIAMI	TRAIL		1	.3 STREET	ADDRESS	s				
SARASOTA FL			1	.4 CITY-S	T-ZIP		_			
			DELETE 2	11 TITLE] Char	ige	☐ Addition
			2	.2 NAME						
			2	3 STREET	ADDRESS	s				
				-	T-ZIP			7.05		TTT A A A SEC.
			DELETE 3	.1 TITLE			L] Char	ige	Addition
			3	3 STREE	ADDRESS	s				
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	ace of Business #, etc. Cour 25 9. Name and Add J. RICHARD S. TAMIAMI TRAIL ASOTA FL 34231 to the provisions of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with, and action of the provision of Segistered agent, or bon familiar with a segistered agent.	ace of Business #, etc. Courtry 25 9. Name and Address of Current J. RICHARD S. TAMIAMI TRAIL ASOTA FL 34231 to the provisions of Sections 607.0502 agistered agent, or both, in the State of mailiar with, and accept the obligate of the state of	ace of Business ace of Business #, etc. Cour try 25 9. Name and Add ress of Current Registered Agent ASOTA FL 34231 to the provisions of Sections 607.0502 and 607.1508, Floregistered agent, or both, in the State of Florida. Such charn familiar with, and accept the obligations of, Section 607.0502 Stgnature, typed or printed ne ne of registered agent and title if applicable OFFICERS AN() DIRECTORS P KIRN, J. RICHARD 7061 S. TAMIAMI TRAIL SARASOTA FL	ace of Business #, etc. #, etc. Courtry Zip Zip Gourtry Zip Jos P. Name and Address of Current Registered Agent ASOTA FL 34231 To the provisions of Scittons 607.0502 and 607.1508, Florida Statutes, the agistered agent, or both, in the State of Florida. Such change was author m familiar with, and accept the obligations of, Section 607.0505, Florida Signature, typed or printed ne ne of registered agent and title if applicable OFFICERS AND DIRECTORS P KIRN, J. RICHARD 7061 S. TAMIAMI TRAIL SARASOTA FL DELETE DELETE DELETE DELETE DELETE	ace of Business Za. Mailing Address	ace of Business 2a. Mailing Address 26 #, etc. Suite, Apt. #, etc. 27 28 Courtry 25 29 9. Name and Address of Current Registered Agent J. RICHARD S. TAMIAMI TRAIL ASOTA FL 34231 83 44 City OFFICERS ANI) DIRECTORS P KIRN, J. RICHARD SIgnature, bysed or printed rie no registered agent and title if applicable OFFICERS ANI) DIRECTORS P KIRN, J. RICHARD 1.3 STREET ADDRES 2.4 CITY-ST-ZIP 1.4 TITLE 2.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 1.5 TITLE 4.2 NAME 3.3 STREET ADDRES 4.4 CITY-ST-ZIP 1.5 TITLE 5.2 NAME 4.3 STREET ADDRES 4.4 CITY-ST-ZIP 1.5 TITLE 5.2 NAME 5.3 STREET ADDRES 5.3 STREET ADDRES 5.4 CITY-ST-ZIP 1.5 TITLE 5.2 NAME 5.3 STREET ADDRES 5.3 STREET ADDRES 5.4 CITY-ST-ZIP 1.5 TITLE 5.5 NAME 5.5 STREET ADDRES	DO NOT WRITE IN THE STANDARD STREET ADDRESS SARASOTA FL 34231 DO NOT WRITE IN THE STANDARDS SARASOTA FL 34231 DO NOT WRITE IN THE STANDARDS SARASOTA FL 34231 DO NOT WRITE IN THE STANDARDS SARASOTA FL 34231 DO NOT WRITE IN THE STANDARDS SARASOTA FL 34231 DO NOT WRITE IN THE STANDARDS SARASOTA FL DELETE SARASOTA FL DELETE SARASOTA FL DELETE SARASOTA FL SARASOTA	DO NOT WRITE IN THIS SP 3. Date Incorporated or Qualified 10/12/1995 ace of Business	DO NOT WRITE IN THIS SPACE 3. Date Incorporation of Qualified 10/12/1995 ace of Business 2a. Mailing Address 2a. Mailing Address 2b. Suite, Apt. W. etc. 2c. Suite, Apt. W. etc. 2c. Suite, Apt. W. etc. 2c. City & State 2d. City & State 2d. City & State 2d. City & State 2d. Country 2d. Country 2d. Trust Fund Contribution 2d. Trust Fund Contribution 2d. Yes 3. Name and Address of Current Registered Agent 3d. Name 3d. Name and Address of New Registered Agent 3d. Name 3d. Street Ac dress (P.O. Box Number is Not Acceptable) 8d. City 8d. Cit	SARASOTA FL 34231 DO NOT WRITE IN THIS SPACE 3. Date incorporate or Qualified 10/12/1995 ace of Business 2a. Mailing Address 26

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 attact ment with an address, with all other like empowered. SIGNATURE: _ SIGNING OFFICE TOR DIRECTOR

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP