**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000090547

BOBCAT OF CENTRAL FLORIDA, INC.

Drivered Disc	of Duninger	Mailing Adde					II ONIED HOUSE BUILDE DE		
Principal Place of Business Mailing Address						i			
4002			2 PALM RIVER RD MPA FL 33619						
TAMPA FL 33619		US	013			DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE		
**						3. Date Incorporated or Qualifed			
1						11/27/1995			
2. Principal P	Place of Business	2a. Mailing A	ddress			4. FEI Number	P	Applied For	
21		26				65-0624763		Not Applicable	
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired	•	Additional	
22		27				5. Certificate of Status Desired	Fee F	Required	
City & Star	te	City & St	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Added	d to Fees	
Zip	Country	Zip		Count	try	8. This corporation owes the current ye			
24	25	29	3	0		Personal Property Tax.	Yes	□No	
	9. Name and Address of Curre	ent Registered Age	nt			10. Name and Address of New Regis	tered Agent		
				8	Name				
KINGSLAND, RICHARD G				5	32 Street	Kingsland, Richard A. Address (P.O. Box Number is Not Acceptable)			
4131 ALDERGATE PLACE			`		889 Willow Run Lane				
ORL	ANDO FL 32708			8	33				
-							05 7:	- C-do	
				8	34 City	Winter Springs		p Code 2708	
11 * Pureuant	to the provisions of Sections 607 05	502 and 607 1508. F	Florida Statutes	the abo	wo named	corporation cubmits this statement for the num	ose of changing it	its registered	
office or i	registered agent or both in the Stat	e of Florida. Such c	hande was aut	nonzea a	by the corpo	oration's board of directors. I hereby accept the	appointment as i	registered	
agent. La	am familiar with, and accept the oblig	gations of, Section t	107.0505, FIORIC	ja Statuti	es.	11 200	ומכלוט	100	
SIGNATURE	R. A. Kingsland	d <u>X</u>		chaid	<u> </u>	equired when reinstating) Do		77	
12.		ND DIRECTORS	(NOTE, A	13.	yent asynature i	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 12	
TITLE	P		DELETE	1.1 TITU	E		[☑ Change		
	KINGSLAND, RICHARD G	•		1.2 NAM		Chairman Kingsland, Richard G	73		
NAME	HANA ADI EDOATE				-		•		
STREET ADDRESS						4131 Aldergate	20700		
CITY-ST-ZIP	WINTER SPRINGS FL 32708		] DELETE	_	-ST-ZIP	Winter Springs, FL	32708Change	e 🙀 Addition	
TITLE		L	_ DECE IE	2.1 TITL		President		<b>X</b>	
NAME				2.2 NAM		Kingsland, Richard A	. •		
STREET ADDRESS	8			2.3 STR	EET ADDRESS	889 Willow Run Lane			
CITY-ST-ZIP				-	Y-ST-ZIP	Winter Springs, FL Executive Vice Presi	32708	Addition	
TITLE		ι	_ DELETÉ	3.1 TITL			dent Lorange	e 🙀 Addition	
NAME				3.2 NAM	E	Hall; Richard A.			
STREET ADDRESS	3			3.3 STR	EET ADDRESS	4205 S. Heathcoe Roa			
CITY-ST-ZIP				3.4. CIT	Y-ST-ZIP	Plant City, FL 3356	7		
TITLE		[	DELETE	4.1 TITL	Ε		Change	e 🗌 Addition	
NAME				4. 2 NAM	Æ				
STREET ADDRESS	5			4.3 STR	EET ADDRESS				
CITY-ST-ZIP	1	•		44 CITY	-ST-ZIP				
TITLE			DELETE	5.1 TITL	E		☐ Change	e 🔲 Addition	
NAME				5.2 NAM	E				
STREET ADDRESS				5.3 STR	EET ADORESS				
	1			5.4 CITY	-ST-ZIP				
CITY-ST-ZIP		]	DELETE	6.1 TTTL	E .		Change	e	
NAME			**	6.2 NAM	1E				
( INVIVIC	1			_		1			

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

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90069 024 \*\*\*158.75

CR2E034 (11/98)