Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90052 023 \*\*\*150.00

## 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 # P96000012582

Corporation Name

INIGHTHITE FOR ADDITION DECEADED THE

INSTITU	TE FOR APPLIED RESEARC	·II, IIV	<b>.</b>				
Principal Place of Business Mailing Address							
1852 RIDGE LAKE CT. WESLEY CHAPEL FL 33543 1852 RIDGE LAKE CT. WESLEY CHAPEL FL 33543							The second was
US US			000 TO 100 TO 10	•			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
							02/05/1996
2. Principal Place of Business 2a. Mailing Address							4. FEI Number Applied For
21							<b>59-3370323</b> Not Applicable
Suite, Apt. #, etc. Suite, Apt.			Suite, Apt. #, etc.	pt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional
22			27				Fee Required
City & State			City & State			-	6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country	$\perp$	Zip	_ Counti	ry		8. This corporation owes the current year Intangible
24	25	29		0			Personal Property Tax.
	9. Name and Address of Current	t Regist	tered Agent	8	<u> </u>	Alama	10. Name and Address of New Registered Agent
ANIO	EDEEN DIAVE T			°	"	Name	
ANDERSEN, BLAKE T				8	2	Street Add	dress (P.O. Box Number is Not Acceptable)
1852 RIDGE LAKE CT. WESLEY CHAPLE FL 33543				_	_ .		
WES	DLET CHAPLE PL 33343			8	3		
				8	4	City	FL 85 Zip Code
		0 4 00	7 4500 Fladda Ctabilia	the obo			proration submits this statement for the purpose of changing its registered
office or t	registered agent, or both, in the State of familiar with, and accept the obligations.	of Florid	a. Such change was aut	horized b	v t	he corporat	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE							uired when reinslating) DATE
	Signature, typed or printed name of registered agen			<u> </u>	gent	signature requi	uired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	D DIKE	DELETE	13.	-		Change Addition
TITLE	[ =			1.2 NAME			
NAME	ANDERSEN, BLAKE T 1852 RIDGE LAKE CT.					1000000	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP					1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE			₩ DELE15	I -			
, NAME				2.2 NAME			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP				2.4 CITY		r-ZIP	↑ Change
TITLE	\ ·		DELETE	3.1.TITLE			Change Addition
NAME				3.2 NAMI			
STREET ADDRESS				3.3 STRE	ET.	ADDRESS	
CITY-ST-ZIP				3.4. CITY	_	r-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE	4.1 TITLE	•		Change Addition
NAME	1			4. 2 NAM			
STREET ADDRESS				4.3 STRE	ET	ADDRESS	
CITY-ST-ZIP				4.4 CITY	_	-ZIP	
TITLE			☐ DELETE	5.1 TITLE		-	☐ Change ☐ Addition
NAME				5.2 NAM			
STREET ADDRESS	{			5.3 STRE	ET.	ADDRESS	
CITY-ST-ZIP				5.4 CITY		- ZIP	
TITLE			☐ DELETE	6.1 TITLE			. Change Addition
NAME				6.2 NAMI	E		

14. I hereby certify that the information supplied with this filling 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 trastee 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 a attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

<del>MEDII</del>RED

813 601-5125