## 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 # P96000053274 1. Corporation Name

H. RICHARD BATES, P.A.

Principal	Place	of	Business
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Mailing Address

260 ARNOLD LANE WINTER SPRINGS FL 32708 260 ARNOLD LANE WINTER SPRINGS FL 32708

## **FILED** Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90073 026 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					06/15/1996						
2. Principal Pl	Principal Place of Business 2a. Mailing		ng Address		4. FEI Number	-	Applied For				
21		26			59-3387599		Not	Applicable			
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5, Certificate of Status Desired		<b>\$8.75</b> A	I			
City & State	3	City & State			6. Election Campaign Financing		\$5.00	May Be			
23		28			Trust Fund Contribution		Added to	, ,			
Zip			Country		8. This corporation owes the curre	ent year Intan	gible				
24	25	29	30		Personal Property Tax.			□No			
24	9. Name and Address of Current				10. Name and Address of New R	egistered A	gent				
			81	Name							
	S, H. RICHARD		82	Stroot Add	race (P.O. Boy Number is Not Accepta	hle)					
260 ARNOLD LANE			62	82 Street Address (P.O. Box Number is Not Acceptable)							
WINT	ER SPRINGS FL 32708		83			` .					
	•					<u>:</u>	: 				
			84	City		FL	85 Zip C	ode			
Marie Committee	to the provinces of Sections 607 0503	and 607 1508 Florida Statutes	s the above	-named com	oration submits this statement for the	purpose of ch	nanging its	registered			
office or re	edistored agent or both in the State o	of Florida. Such change was aut	tnorizea by	tne corporati	on's board of directors. I hereby accep	t the appoint	ment as reg	jistered			
agent. I ar	m familiar with, and accept the obligati	ions of, Section 607.0505, Flori	da Statutes	•							
SIGNATURE		MOTE C	Designation of Ages	t eigenture cacules	d when reinstating)	DATE					
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	r signatura radune	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12			
12.	D OFFICERS AND	□ DELETE	1.1 TITLE		1 10 10		Change	Addition			
TITLE	•		1.2 NAME								
NAME	BATES, H. RICHARD,										
STREET ADDRESS	260 ARNOLD LANE		1.3 STREET								
CITY-ST-ZIP	WINTER SPRINGS FL 32708	☐ DELETE	1.4 CITY-S	r-zip			Change	Addition			
TITLE		□ pereie	2.1 TITLE					_			
NAME			2.2 NAME								
STREET ADDRESS	•		2.3 STREET	1							
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP			Change	Addition			
TITLE 5,	en en en en en e	☐ DELETÉ	3.1 TITLE				☐ Change	L / Addition			
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET	ADDRESS							
CITY-ST-ZIP			3.4. CITY-S	T-ZIP							
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition			
NAME	•		4. 2 NAMÉ		•						
STREET ADDRESS	¥ •	•	4.3 STREET	r address							
CITY-ST-ZIP			4.4 CITY-S	T-ZIP							
TITLE		☐ DELETÉ	5.1 TTLE				☐ Change	Addition			
NAME ,		•	5.2 NAME								
STREET ADDRESS			5.3 STREE	FADDRESS							
CITY-ST-ZIP	8		5.4 CITY-S	T-ZIP	S						
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition			
NAME	22 1 2 3		6.2 NAME								
STREET ADDRESS			6.3 STREE	TADORESS							
CITY-ST-ZIP			6.4 CITY-S	T-ZIP							
Unit-SI-ZIP				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.

SIGNATURE: