## 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 # **P96000073226** 1. Corpolation Name

LARGO ACLF, INC.

Principal Place of Business

Mailing Address

750 STARKEY ROAD LARGO FL 34641		750 STARKEY ROAD LARGO FL 34641		REINSTATEMEN			
				<ol> <li>Date incorporated or Qualified</li> <li>09/04/1996</li> </ol>			
21	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0697160	h	oplied For ot Applicable	
Suite Apt	#, etc	Suite, Apt. #, etc.		5. Certifcate of Status Desired		Additional equired	
City & State	е	City & State		6. Election Campaign Financing Trust Fund Contribution		May Be	
Ζη. 24	Country 25	Zip 3	Country	<ol><li>This corporation owes the current year Intal Personal Property Tax.</li></ol>	ngible	□No	
	9. Name and Address of Curr			10. Name and Address of New Registered A	gent		
F1116	OVERTURE O		81 Name	N2-1-1			
	S, CYNTHIA C		82 Street	Address (P.O. Bpx Number is Not Acceptable)			
	FINO & FLEISCHER, P.A. N. FRANKLIN STREET #2700		73	b Sterker			
i company	PA FL 33602		83				
I PANII	-A FL 33002		84 City	♦/W FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.09	502 and 607.1508. Florida Statutes	the shove-named	cornoration submits this statement for the purpose of of	hanging its	registered	
office or re	egistered agent, or both, in the State	e of Florida. Such change was aut	horized by the corp	oration's board of directors. I hereby accept the appoint	ment as re	gistered	
ŧ	A tallination of the control of the control	Jations of, Section 607.0505, Pione			-		
SIGNATURE	Signature, typed or printed rame of registered a		egistered Agent signature				
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
1/TLE	D	☐ DELETE	1.1 TITLE	D.61	(Z) etiange	Addition	
KAME	MOSES, MICHAEL J		1.2 NAME	3000030128	303-	4	
STREET ADDRESS	750 STARKEY ROAD		1.3 STREET ADDRESS	3000030128 -10/12/9901	0550	112	
City-St-ZiP	LARGO FL 34641		1.4 C/TY-ST-ZiP	****750.00	****75	0.00	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition	
NAME	PAGGEOT, REX		2.2 NAME				
STREETADORESS	750 STARKEY RD		2.3 STREET ADDRESS				
CITY-ST-ZIP	LARGO FL 34641		2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
T'ft F		☐ DELETE	4.1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS			]	
CITY:ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition	
NAME			5.2 NAME	1			
STREET ADDRESS.			5.3 STREET ADDRESS	Aind		İ	
C/TY-S1-Z/P			5.4 CITY-ST-ZIP	(LIVI (AV)			
TITLE		☐ DELETE	8.1 TITLE	h. 1	☐ Change	Addition	
NAME			8.2 NAME	•			
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP			]	

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: \_

SIGNATURE AND EMPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MOJES

5/2/59

727-585-738