FILED

Feb 23, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000082413**1. Corporation Name

AMYX & CHRISTY, INC.

Dein ein al Dia a	(Di	14-9: Add-				HIIK 02011 00101 10113 11011 91001	
Principal Place of Business Mailing Address					†		
5542 LAKE HOWELL RD PO BOX 2533							
WINTER PARK FL 32792 WINTER PARK FL 32790 US US					DO NOT WRITE IN THIS SPACE		
00					3. Date Incorporated or Qualifed		
					09/25/1996		
2 Principal F	Place of Business	2a, Mailing Address			4. FEI Number		plied For
21 514	26	annig / todicod		59-3402644	}	`	
21 S14 S. EOM Dr. 26 Suite, Apt. #, etc. Suite, Apt. #, et			oto		39-3402044		t Applicable
			рі. н, еіс.		5. Certificate of Status Desired	□ \$8.75 A	-
22 27 City & State City & State					+		
					6. Election Campaign Financing	\$5.00	
		28	Zip Country		Trust Fund Contribution	Added t	o Fees
Zip	Country	<u>├</u> ──	¬ '		8. This corporation owes the current year intangible Personal Property Tax		
24 325			0		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent		1 Name	10. Name and Address of New I	Registered Agent	
CHR	IISTY, WILLIAM J		l°	Name U	WILLIAM J. CHRIST	Ž.	•
1324 SUNSET DRIVE			8		ress (P.O. Box Number is Not Accepta	able)	
WINTER PARK FL 32789				51	45. EOIA DRIVE		
***	IER FARR FL 32/09		8	3	LANDS FEBRUAR		
			B	4 City	CANDO FLORENCE	85 Zip C	ode
				3	≥5 ·		501
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	, the abo	ve-named corp	poration submits this statement for the	purpose of changing its	registered
office or r	egistered agent, or both, in the State o im familiar with, and accept the obligati	f Florida, Such change was aut ons of Section 607 0505. Florid	norized t la Statute	y the corporations	on's board of directors. I hereby accep	of the appointment as reg	gistered
-		0,10 0,1 000,10,1 00,10000,1 1,0110			-		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Ag	pent signature require	d when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	CHRISTY, WILLIAM J		1.2 NAMI				
STREET ADDRESS	1324 SUNSET DRIVE		13 STRE	ET ADDRESS			}
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CITY				{
TITLE			2.1 TITLE			Change	Addition
NAME			1	- 1			
	AMYX, CHARLES E JR		2.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			2.4 CITY				
TITLE	•		3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME	 			-
STREET ADDRESS	1324 SUNSET DR		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4,1 TITLE	[☐ Change	☐ Addition
NAME			4. 2 NAM	E			j
STREET ADDRESS			4.3 STRE	ET ADDRESS	•		}
CITY-ST-ZIP			4 4 CITY-	ST-ZIP			ļ
TITLE			5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			Ì
TITLE		☐ DELETE	6.1 TITLE			[Change	Addition
NAME			6.2 NAME		-		
			•	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 for on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP