## 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 # P96000083403

Mailing Address

KEYSTONE HEIGHTS FL 32656

PO BOX 2175

Principal Place of Business

8186 ALDERMAN RD

MELROSE FL 32666

FLORIDA ADVERTISING PLACEMENT AGENCY, INC.

03		00				3. Date Incorporated or Qualifed		
						10/07/1996		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Ar	oplied For
21		26 POBOX 9				59-3406121	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			-5. Certificate of Status Desired 58.75 Additional Fee Required		
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23			LADY LAKE , FL			Trust Fund Contribution Added to Fees		
				untry  8. This corporation owes the current year Intangible		ntangible		
24	25 29 32158 30 (			USA Personal Property Tax. Yes No				
Name and Address of Current Registered Agent						10. Name and Address of New Registere	d Agent	
			8	1 Nar	ne			
CAUSEY, BRUCE G				82 Street Address (P.O. Box Number is Not Acceptable)				
8186 ALDERMAN RD.				02 Street Address (1.0. Dox Hallison is Not Hospitalis)				
MELROSE FL 32666				3				
				4 0"			05 7:0	Code
			*	4 City		F	L  85   Zip	Code
office or re	to the provisions of Sections 607.0502 agistered agent, or both, in the State on familiar with, and accept the obligation	f Florida. Such change was a	uthorized t	y the co	ed corpor propration	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as re	, registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered A	gent signat	ure required	when reinstating) DATE		<del></del>
12.	OFFICERS AND		13.	a 3		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	P	☐ DELETE	1.1 TITLI				Change	☐ Addition
NAME	CAUSEY, BRUCE		1.2 NAM	Ε				. 1
STREET ADDRESS	8186 ALDERMAN RD		1.3 STR	EET ADDRE	ss			ļ
	MELROSE FL			-ST-ZIP				
CITY-ST-ZIP TITLE	ST	☐ DELETE	2.1 TITL		<del></del>		Change	☐ Addition
	NEUHARTH, ELIZABETH M		2.2 NAM	F	İ			
NAME	12601 SE 53RD TERRACE RD			ET ADDRI	:ee			
STREET ADDRESS	BELLEVIEW FL							
CITY-ST-ZIP	V DELLEVIEW FL	☐ DELETE	3.1 TITLI	(-ST-ZIP =			Change	Addition
TITLE	•	_ becere	3.2 NAM				_ ,	_
NAME	SOPER, ELAINE		1					
STREET ADDRESS	8026 DUNSTABLE CIRCLE			EET ADOR!	:55			
CITY-ST-ZIP	ORLANDO FL	☐ DELETE	3.4. CIT	(-ST-ZIP			☐ Change	Addition
TITLE							590	
NAME			4. 2 NAN		-00			
STREET ADDRESS				EET ADDRI	:55			ĺ
CITY-ST-ZIP		O DELETE	4.4 CITY		-		☐ Change	Addition
TITLE		☐ DELETE	5.1 TITL				[_] change	
NAME								
STREET ADDRESS				EET ADDRI	.00			l
CITY-ST-ZIP				-ST-ZIP			Chanca	Addition
TITLE		☐ DELETE	6.1 TITLE				Change	Audiuon
NAME			62 NAM					
STREET ADDRESS				EET ADDRI	SS			
CITY-ST-ZIP				-ST-ZIP				
indicated officer or a	on this annual report or supplemental.	annual report is true and accu ver or trustee empowered to e	rate and the execute this	nat my s s report	signature as requir	ection 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made un- red by Chapter 607, Florida Statutes; and that	nder oatn; that	i am an

**FILED** 

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90093 011 \*\*\*150.00

DO NOT WRITE IN THIS SPACE