FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DE PARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700005350 1. Corporation Name

CLINCOR, INC.

Principal Place of Business

2105 PARK AVENUE. NORTH WINTER PARK FL 32789

P.O. BOX 4961

2. Principal Place of Business 2a. Mailing Addr	ess
26	
Suite, Apt. #, etc. Suite, Apt. #	, etc
27	
City & State City & State	
28	
Zip Country Zip	
24 29	[30
9. Name and Address of Current Registered Agent	

B&C CORPORATE SERVICES OF CENTRAL FLORIDA

390 NORTH ORANGE AVENUE **SUITE 1100** ORLANDO FL 32801

Mailing Address

ORLANDO FL 32802-4961

81	Name
81	Name

827 Street Aridress (P.O. Box Number is Not Acceptable)

3. Date Incorporated or Qualifed.

5. Certificate of Status Desired

Trust Fund Contobution

Personal Property Tax

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

01/17/1997 4. FET Number

59-3427593

83 B4 City

85 Zip Code

[| Yes

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8,75 Additional

[]No.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's bound of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

	Signature, typed or printed name of registered agent and the	enfaggio africa. (NOTE	Registered Age it signature	tergrane for his in the installation of
12.	OFFICERS AND DIR	ECTORS	13.	ADDITIONS/CHANGE
THLE	PSTD	() DELETE	1.1.101.6	D/Ab
NAME	JOHNSON, TONY B		1.2 NAME	Johnson, Tony B.
STREET ADDRESS	2105 PARK AVENUE NORTH		13 STREET ACCRS 55	2105 Park Avenue
CITY-ST-ZIP	WINTER PARK FL 32789		14 C/14 - ST-ZIP	Winter Park, FL
TITLE	VP	[] DELETE	211HcF	D/P
NAME	PEPPER, DONNA D		2.7 NAME	Pepper, Donna D.
STREET ADDRESS	AAAA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA		2.3 STREET ADDRESS	2105 Park Avenue
CITY-ST-ZIP	WINTER PARK FL 32789		2 4 C/TY - \$1 - Z(f	Winter Park, FL
TITLE		[] DELETE	3.1 TiffEF	D/S/T
NAME			3.2 NAME	Stewart Marcus
STREET ADDRESS			3.3.5.1REE LADERENS	3225 Aviation Av
4 Cit√-ST-ZIP			34 CITY-S1 Zar	Coconut Grove, F
TITLE		[] DELETE	4 1 TIFLE	D/VP
NAM:			4-2 NAM	Randy E. Rieger
STREET ADDRESS			4.3 STREET ADDRESS	3225 Aviation Av
CITY-ST-ZIP			44 OCY-S1 Zier	Coconut Grove, F
TITLE		[] DELETE	5.1 THE	
NAME			5.2 NAME	200
STREET ADDRESS			53 STREET ADDRESS	,
CITY-ST-ZIP			54 C(1) - ST Z(r)	ţ
TITLE		[]DELETE	€17iTLF	
NAME			6.2 NAME	
STREET ADDRESS			63 STREET ADDRESS	
CITY, ST. 7ID			64 CHY-51-761	

DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **★**Change { | Addition

xxI Change

05 Park Avenue North nter Park, FL 32789 **XX**Onange f | Addition pp**e**r, Donna D. 05 Park Avenue North

FILED

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DO NOT WRITE IN THIS SPACE

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ewart Marcus 25 Aviation Avenue, Suite 700 conut Grove, FL 33133

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ndy E. Rieger 25 Aviation Avenue, Suite 700

conut Grove, FL 33133

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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes 1 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 logal 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.

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