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 # **P97000024852**1. Corporation Name

MARKETPLACE MANAGEMENT CORP.

Principal Place of Business	Mailing Address
300 EAST PARK AVENUE	300 EAST PARK AVENUE
TALLAHASSEE FL 32301	TALLAHASSEE FL 32301

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90130 010 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

02/10/1007

					00/10/1007	TT:		
2. Principal Pl	al Place of Business 2a. Mailing Address				4. FEI Number		plied For	
21	26				59-3436813		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75		
22		27			3. Certificate of Clates Besides	Fee Re	equired	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Zip	Countr		8. This corporation owes the current year Intal	ngible		
24	25,	29 3	n		· · · · · · · · · · · · · · · · · ·	∐Yes	□No.	
24	9. Name and Address of Current		<u> </u>		10. Name and Address of New Registered A	gent		
	J. Harris and Addiess of Carrett	· · · · · · · · · · · · · · · · · · ·	81	81 Name Frederick L. Bateman, Jr.				
WΩI	.FE, WALTER H JR.		1					
300 EAST PARK AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			L.	300 East Park Avenue				
TALLAHASSEE FL 32301				1				
	۸۵		84	City		85 Zip (Code	
	X/		"	' Ciiy	Tallahassee FL		301	
11 Pursuant	to the provisions of Sections 607 0562	and 607.1508. Florida Statutes	the abov	e-named corr	poration submits this statement for the purpose of c	hanging its	registered	
office or n	egistered agent, or both in the State on familiar with, and accept the obligati	of Florida. Such change was aut ions of, Section 607.0505, Florid	horized by la Statute	the corporations.	on's board of directors. I hereby accept the appoint	ment as re	gistered [
SIGNATURE	Signature, typed or printed name of registered agent				ed when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DRS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	1 7		Change	☐ Addition	
i	BATEMAN, FREDERICK L JR.	-	1.2 NAME		Frederick L. Bateman,			
NAME					-	OI.		
STREET ADDRESS	200 2101 17411 712102				300 East Park Avenue			
CITY-ST-ZIP	TALLAHASSEE FL 32301		1.4 CITY-1	ST-ZIP	<u> Tallahassee, FL 32301</u>		FTL & JURE-	
TITLE		☐ DELETE	2.1 TITLE	-		Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	TADORESS				
CITY-ST-ZIP			2, 4 CITY-	ST-ZIP			-	
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition	
			3.2 NAME					
NAME								
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			3.4. CITY- 4.1 TITLE	ST-ZIP		☐ Change	☐ Addition	
TITLE	:	☐ DELETE 4.11				□ criange		
NAME	r		4. 2 NAME				Ì	
STREET ADDRESS	l		4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST- ZIP				
TITLE	☐ DELETE 5.1 TO		5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
			5.3 STREE	T ADDRESS			Ì	
STREET ADDRESS			5.4 CITY-	ST-ZIP				
CITY-ST-ZIP		☐ DÉLETE	6.1 TITLE			Change	Addition	
TITLE		T DETE IC	6.2 NAME					
NAME								
STREET ADDRESS			6.3 STRE	TADDRESS				
CITY-ST-ZIP			6.4 CITY-	. 1				
AA Ibaaabaa	ATT AND A SECURITION OF THE PROPERTY OF THE PR	h this filing doos not qualify for t	ha avama	tion stated in	Section 119 07(3)(i) Florida Statutes I further certi	fy that the	information	

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 reporter 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 adaptiment with an address, with all other like empowered.

SIGNATURE:

(850) 222-6100

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #