## 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 # P9700030357

Corporation Name

WEBHEADS, INCORPORATED										
Principal Plac	e of Business	Mailing Address						1111 98188	iten <b>ébibb</b> mitét	84114 1884 1881
3975 EMERALD CHASE 3975 EMERALD CHASE										
TALLAHASSEE FL 32308-5758 TALLAHASSEE FL 32308-57			8				DO NOT WRITE I	м тыіс	SPACE	
						3	. Date Incorporated or Qualifed	11110	OI NOL	
							04/03/1997			
2. Principal P	Place of Business	2a. Mailing Address				4	. FEI Number		Ap	plied For
21		26					59-3440746		_ <del> </del>	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			•		. Certifcate of Status Desired		\$8.75 A	dditional
22		27				3	. Certificate of Status Desired	J	Fee Re	quired
City & Stat	te	City & State				6	Election Campaign Financing	1	\$5.00	May Be
23		28					Trust Fund Contribution	J 	Added to	o Fees
Zip	Country	Zip	Cou	ntry		8	. This corporation owes the current y	ear Inta		ra
24	25		30				Personal Property Tax.			£Z[No
	9. Name and Address of Current	Registered Agent		81	Name	10	. Name and Address of New Regi	stered /	igent	
COL	JRSEY, DAVID			0,	Name					
3975 EMERALD CHASE				82	Street Ac	ddress (	P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32308-5758				83						
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			03						
				84	City			FL	85 Zip C	ode
11 Pursuant	to the provisions of Sections 607.0502	and 607 1509 Elorida Statutos	the al		a named co	ornoratio	on submite this statement for the nurr		hanging its	registered
office or r	registered agent, or both, in the State of im familiar With, and accept the ebligation	f Florida. Such change was auf	horized	by t	the corpora	ation's b	poard of directors. I hereby accept the	appoin	tment as rec	jistered
l,	im familiar with, and accept the ebligation	ons of, Section 607.0505, Florid				/1 .1				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: 6	V/C	2 Agent	t signature requ	C Je w	reinstation)	4 99 PATE		
12. OFFICERS AND DIRECTORS				13.			ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1,1 111	ΠE		i			☐ Change	☐ Addition
NAME	PATTERSON, DIANA 🥌		1.2 NA	ME						
STREET ADDRESS	3975 EMERALD CHASE	,	1.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL 32308-5758		1.4 CIT	TY-ST	r-ZIP .					
TITLE	VP DELETE			TLE	- (				Change	☐ Addition
NAME	COURSEY, DAVID		2.2 NAME		′					
STREET ADDRESS			2.3 STREET ADDRESS							
CITY-ST-ZIP	ST-ZIP TALLAHASSEE FL 32308-5758		2. 4 CITY-ST-ZIP							
TITLE	☐ DELETE		3.1 TIT	ΊE					☐ Change	☐ Addition
NAME			3.2 NA	ME						
STREET ADDRESS		3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CF	TY-ST	T-ZIP		-			
TITLE		☐ DELETE	4.1 TIT	LE					Change	☐ Addition

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.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 C/TY-ST-ZIP

4.4 CITY-ST-ZIP

**SIGNATURE** 

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIBECTOR

DELETE

□ DELETE

Culty 1 1941 55 (850) 95

**FILED** 

Jan 20, 1999 8:00am

**Secretary of State** 

01-20-1999 90006 004 \*\*\*150.00

CR2E034 (41/98

Change

Change

Addition

☐ Addition