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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris \$150

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000039232

1. Corporation Name

NEPTLINE MANAGEMENT INC

May 05, 1999 8:00 am Secretary of State

05-05-1999 90090 048 ***150.00

IACI TÓIN	E WARAGERERTY THO								
Principal Place of Business Mailing Address									
10887 OVERSEAS HIGHWAY 10887 OVERSEAS HIGHWAY				Y					
MARATHON FL 33050 MARATHON FL 33050								DO NOT WRITE IN THIS SPACE	
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualifed 05/02/1997	
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For	
21			26					65-0771888 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
22			27					Fee Required	
-City & State							_	6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
	Zip Country		Zip Cour				8. This corporation owes the current year Intangible Personal Property Tax.		
24								10, Name and Address of New Registered Agent	
"-	9. Name and Address of Current	Kegis	egistered Agent			81 Name		10, Maine and Address of New Registered Agent	
COA.	TES, WILLIAM J.				0'	140	iiie		
10887 OVERSEAS HWY						Str	eet Addre	ress (P.O. Box Number is Not Acceptable)	
MARATHON FL 33050						ļ			
WAR	ATHON FL 33030				83				
					84	Cit	у	FL 85 Zip Code	
44 Diversions	to the provisions of Costings 607 0503	and 6	07 1508 Florida Statut	ac the	above	e-nar	ned como	position submits this statement for the purpose of changing its registered	
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 board of directors. I hereby accept the appointment as registered									
agent. I a	m familiar with, and accept the obligati	ions of	, Section 607.0505, Flo	rida Sta	tutes	٠.			
SIGNATURE			i NOTE	. Danistan			ture required	d when reinstating) DATE	
40	Signature, typed or printed name of registered agent OFFICERS AND			13		ni signa	iture reduied	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD OFFICERS AND	J DINE	DELETE		TITLE		1	Change Addition	
1	COATES, WILLIAM J				1.2 NAME				
NAME	10887 OVERSEAS HIGHWAY				1.3 STREET ADDRESS		cee l		
STREET ADDRESS	MARATHON FL 33050								
CITY-ST-ZIP	VD		☐ DELETÉ	_	CITY-S	1-ZIP		☐ Change ☐ Addition	
TITLE	· · ·			•					
NAME	COATES, SUSAN A 10887 OVERSEAS HIGHWAY			2.2 NAME 2.3 STRE		* • • • •	NEGO		
STREET ADDRESS	MARATHON EL ACOCO		i				ESS	,	
CITY-ST-ZIP	MARATHON FL 33050			_	2.4 CITY-ST-ZIP 3 1 TITLE			☐ Change ☐ Addition	
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STREET ADDRESS	-c			3.4 CITY-S			LE33		
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STREET ADDRESS					STREE		(E33)		
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NAME				- 1	STREE	T ADDE	ess		
STREET ADDRESS				1	CITY-S				
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NAME					STREE	ፐ ልቦቦ።	25.66		
STREET ADDRESS				. I			123		
CITY-ST-ZIP	1			6.4	CITY-S	ı-ZIP	ı		

CITY-ST-ZIP 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.

SIGNATURE: _

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