₋∙PROFIT É CÒRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherino Harris

Secretary of State

l l	1999	UIVISIC	IN OF CORPO	rations	_ `			
I. COIPCIAIN	IMENT # P9700 C. ORR, INC.	0048168			1 10 10 10 10 10 10 10 10 10 10 10 10 10	1514 SIDDI (1816) HDIF	1 3131 1 1 12 1 11 1	
Principal Plac	ce of Business	Malling Address			[[100]0.5()10 (0.00) op()) op())	IBIN BIGGI IBIGI MUIG		
7365 118TH DRIVE 7365 118TH DRIVE								
LARGO FL 337	773	LARGO FL 33773			DO NOT WRITE IN T	HIS SPACE		
					3. Date Incorporated or Qualifed 06/02/1997]
2. Principal Place of Business 2a. Malling Address					4. FEI Number	I I AD	plied For	1
21		26			59-3449882	<u> </u>	t Applicable	1
Suite, Apt.	. #, etc.	Sulte, Apt. #, e	łc.		5. Certificate of Status Desired	\$8.75	vdditional	1
22		27			8. Certificate of dialog desired	Fee Re	quired	
City & Stat	te	-City & State -			8. Election Campaign Financing	\$5:00		1
23		28			Trust Fund Contribution	Added t	o Fees	┨
- Zip	————County— وتعدد	Zip	Cor	miry	- 8. This corporation owes the current year	r Intangible Yes	□No	
24	9, Name and Address of Cur	29	30	T	Personal Property Tax. 10. Name and Address of New Register		C MD	1
	8, Maille and Address of Col	rent registered Agent		81 Name	ID. Italita and Admissa at the Academic			1
ORF	r, denise m			<u></u>				4
7365 - 118TH DR.				82 Street Addr	ress (P.O. Box Number is Not Acceptable)			
LARGO FL 33773				83				1
				74 CIN		85 Zip C	ode	┨
84 City					FL			
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida	Statutes, the a	bove-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its	registered]
office or i	registered agent, or both, in the Ste am familiar with, and accept the obl	ite of Florida. Such change igations of, Section 607.05(was suthorized)5, Florida Stat	ules.	un's board of directors. I hereby accept the ap	bounding as let	Jistereu	}
SIGNATURE						<u> </u>		_
	Signature, typed or printed name of registered	apent and title if applicable. AND DIRECTORS	(NOTE: Registered	Agent signature required	ADDITIONS/CHANGES TO OFFICERS		PS IN 12	CR2E034 (11/98)
12.	PSTD	DELE		TLE T	ADDITIONADIAN CONTROL OF THE CONTROL	☐ Change	Addition	=
NAME	ORR, STEPHEN CONRAD		1,2 N	E E				Z Z
STREET ADDRESS	-045 446TH 0005		1.35	REET ADORESS				
CITY-ST-ZIP	LARGO FL 33773		1.4 G	7Y-57-ZIP] 2
TITLE		☐ D€LE	TE 2,111	rle .		Change	☐ Addition	0
NAME			22 N	WE				
STREET ADDRESS			2.3 \$1	REET ADDRESS				ł
CITY-ST-ZIP				TY-ST-ZIP				1
TITLE		DELE	TE 3.1 TI	Lré		Change	Addition	1
NAME	(3.2 N	1				
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CITY-ST-ZIE		☐ DELE		TY-ST-ZIP		Change	Addition	 -
TITLE		الم المجلد	·- 1		-			ĺ
NAME			4.2N	REET ADDRESS				
STREET ADDRESS	}		- 4	TY-ST-ZIP	•			
CITY-ST-ZIP		() DELE				Change	Addition	1
NAME			\$2 NJ		· ·		_	
STREET ADDRESS			5.3 ST	REET ADDRESS				
CITY-ST-ZIP			5.4 CT	TY-\$T-2IP				
TITLE		☐ DELE	TE 6.1 TF	ie		Change	☐ Addition	
NAME			5.2 N	ME				l
STREET ADDRESS	!		B3 ST	REET ADDRESS				1

14. I hereby certify that the information supplied with this fiting 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90177 034 ***150.00