

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

**FILED**  
**Apr 14, 1999 8:00 am**  
**Secretary of State**

04-14-1999 90018 003 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P97000048351**

1. Corporation Name  
**PHILLIPPE ESTATES, INC.**



Principal Place of Business  
**5514 PARK BLVD.  
 PINELLAS PARK FL 33781**

Mailing Address  
**P.O. BOX 10243  
 LARGO FL 33773**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**05/23/1997**

4. FEI Number  
**59-3452808**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business  
 21  Suite, Apt. #, etc.  
 22 City & State  
 23 Zip Country  
 24

2a. Mailing Address  
 26 Suite, Apt. #, etc.  
 27 City & State  
 28 Zip Country  
 29 30

9. Name and Address of Current Registered Agent

**REED, JOHN W  
 5514 PARK BLVD.  
 PINELLAS PARK FL 33773**

10. Name and Address of New Registered Agent

81 Name **Reed John W**

82 Street Address (P.O. Box Number is Not Acceptable)  
**5514 Park Blvd.**

83

84 City **Pinellas Park** FL 85 Zip Code **33781**

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **John W Reed Director John W Reed** **4/8/99**

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
 NAME **D REED, JOHN W**  
 STREET ADDRESS **5514 PARK BLVD.**  
 CITY-ST-ZIP **PINELLAS PARK FL 33773**

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
 1.2 NAME **D Reed John W**  
 1.3 STREET ADDRESS **5514 Park Blvd.**  
 1.4 CITY-ST-ZIP **Pinellas Park FL 33781**

2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 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: **John W Reed** **4/8/99** **727-392-7980**

CR2E034 (1/98)