## 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 # P97000051801

1. Corporation Name

DURRETT, BOWYER, MCCULLOUGH & WEISS, P.A.

## **FILED** Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90061 021 \*\*\*150.00

Principal Place	of Business	Mailing Address						
3700 PROGRESS BLVD. 3700 PROGRESS BLVD.								
MOUNT DORA FL 32757 MOUNT DORA FL 32757						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						06/09/1997		
5 D	f Dusings	2a. Mailing Address				4. FEI Number Applied For		
<b>⊢</b> '	ace of Business	<del></del>				59-3454152 Not Applicable		
21 26 59		Suite, Apt. #, etc.	uite Ant # etc			\$8.75 Additional		
h						5. Certificate of Status Desired Fee Required Fee Required		
City & State		City & State		-		6. Election Campaign Financing S5.00 May Be		
⊢ <sup>-1</sup> , -1		28				Trust Fund Contribution Added to Fees		
Zip			Cour	ntry		8. This corporation owes the current year Intangible		
24	25	29 30			Personal Property Tax.			
	9. Name and Address of Current					10. Name and Address of New Registered Agent		
				81	Name			
	YER, BONNY		_	82	Chrost Ad	ddress (P.O. Box Number is Not Acceptable)		
x826x\		Country Club R	d.	02	Stieet Au	duless (F.O. Dox Nulliber is Not Necephable)		
. MOH	NKRORA Ek32357 Eusti:	s, FL 32726		83				
_						85 Zip Code		
				84	City	FL		
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the at	ove	-named co	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
office or re	egistered agent, or both, in the State to m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	da Statu	ıtes.	ile corpore	and a board of directors. Thorough the approximation and a		
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agent		_	Agent	signature requ	puired when reinstating)  DATE  AND PROFESTABLE IN 149		
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  □ Change □ Addition		
TITLE	DP	DELETE	1.1 TIT	LE		DP		
NAME	BOWYER, BONNY		1.2 NA		B	SOWYER, BONNY		
	x826.WEDGEWOOR.DR		1.3 ST	REET	ADDRESS 1	103 Country Club Road		
CITY+ST+ZIP	MOUNT DORA EL 32757		1.4 CR	Y-ST	-ZIP E	custis, FL 32726		
TITLE	DT	☐ OELETE	2.1 TIT	LE	ļ	Change Addition		
NAME	WEISS, DAVID L		2.2 NA	ME		1		
STREET ADDRÉSS	21211 REEDY ROAD		2.3 ST	REET	ADDRESS	· • • • • • • • • • • • • • • • • • • •		
CITY-ST-ZIP	EUSTIS FL 32736		2. 4 CI	TY-S	-ZIP			
TITLE	DS	☐ DELETE	3.1 TII	LE		☐ Change ☐ Addition		
NAME	MCCULLOUGH, R. SCOTT		3.2 NA	ME		}		
STREET ADDRESS	1150 GROVE AVE.		3.3 ST	REET	ADDRESS			
C/TY-ST-ZIP	MOUNT DORA FL 32757		3.4. CI	TY-S	r-ZIP			
TITLE		☐ DELETE	4,1 TII	LE		☐ Change ☐ Addition		
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 Cf	TY-ST	-ZIP			
TITLE		☐ DELETE	5.1 TIT	LE.		☐ Change ☐ Addition		
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET	ADDRESS -			
CITY-ST-ZIP			5.4 CI	TY-ST	-ZIP			
ਜ਼π∟E		☐ DELETE	6.1 TII	LLE		☐ Change ☐ Addition		
NAME			-					
			6.2 N	ME				
STREET ADDRESS					ADDRESS			

14. 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: