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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000054022

1. Corporation Name

SMITH, CLARK, DELESIE, BIERLEY, MUELLER & KADYK,

						1 10011001 110 10111 10011 00111 00111		.,
Principal Place	e of Business	Mailing Address						
100 NORTH TA	MPA STREET	100 NORTH TAMPA ST	REET					
SUITE 2120		SUITE 2120				THE STATE OF THE S		
TAMPA FL 33602		TAMPA FL 33602				DO NOT WRITE IN  3 Date Incorporated or Qualifed	HIS SPACE	
						06/19/1997		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				59-3453830	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certificate of Status Desired	\$8.75	Additional
22		27				5. Certifcate of Status Desired	Fee Re	equired
City & State	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28			-	- Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cot	untry		g. This corporation owes the current year	r Intangible	
<del>-</del>	25	29	30	•		Personal Property Tax.	☐Yes	□No
24	g. Name and Address of Current		00	Τ	-	10. Name and Address of New Registe	red Agent	
	g. Name and Address of Carlott	t nogotored Agent		81	Name			
SMIT	TH, H. VANCE							
100 NORTH TAMPA STREET				82	Street A	Idress (P.O. Box Number is Not Acceptable)		
	E 2120						·	
	PA FL 33602			83				
IVIAL	FA 1 L 33002			84	City		85 Zip	Code
					•			
11. Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida St	atutes, the a	bove	-named c	rporation submits this statement for the purpor	e of changing its	registered
office or n	egistered agent, or both, in the State in the State in familiar with, and accept the obligation	or Florida, Such change wa tions of, Section 607,0505.	s autnonze Florida Stat	a by t tutes.	me corpor	ation's board of directors. I hereby accept the a	ppointment as re	gistered
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable. (h	IOTE: Registered	Agent	signature rec	uired when reinstating) DA1	E .	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 T	ITLE		Director	☐ Change	Addition
NAME	CLARK, ROBERT W		1.2 N	AME		Smith, H. Vance		- ,
STREET ADDRESS	100 N. TAMPA ST., STE. 2120		135	TREET	ADDRESS	100 N. Tampa St., Ste 2	2À	
	TAMPA FL 33602			ITY-ST	Į.	Tampa, FL 33602	.20	
CITY-ST-ZIP	D	☐ DELETE			- ZIF	Tallipa, FL 330UZ	Change	Addition
TITLE		C Decere					_ ,	
NAME	BIERLEY, JOHN C		2.2 N			•		
STREET ADDRESS	100 N. TAMPA ST., STE. 2120		2.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL 33602			CITY-S	r-ZIP			<b></b>
TITLE	D	☐ DELETE	3.1 T	ITLE		·	☐ Change	☐ Addition
NAME	DELESIE, JAMES C SR.		3.2 N	AME				
STREET ADDRESS					- 1			
CITY-ST-ZIP	100 N. TAMPA ST., STE. 2120		3.3 S	TREET	ADDRESS			
TITLE	100 N. TAMPA ST., STE. 2120 TAMPA FL 33602			TREET CITY-S	- 1			
mac	I	☐ DELETE	3.4. 0	CITY-S	- 1	<del>.</del>	☐ Change	Addition
NAME	TAMPA FL 33602	☐ OELETE	3.4. C	CITY-S	- 1	·	☐ Change	Addition
NAME	TAMPA FL 33602 D DELESIE, J. CRAIG JR.	☐ DELETE	3.4. C 4.1 T 4.2 N	DITY-ST ITLE NAME	r-zip	······································	☐ Change	Addition
NAME STREET ADDRESS	DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120	☐ DELETE	3.4.0 4.1 T 4.2 N 4.3 S	CITY-S' ITLE VAME TREET	r-zip Address	······································	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	TAMPA FL 33602  D DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120 TAMPA FL 33602		3.4.0 4.1 T 4.2 N 4.3 S 4.4 C	CITY-S' ITLE VAME TREET	r-zip Address		☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	TAMPA FL 33602  D DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120 TAMPA FL 33602  D	☐ DELETE	3.4. C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T	CITY-S' ITLE VAME TREET CITY-SI ITLE	r-zip Address			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TAMPA FL 33602  D DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120 TAMPA FL 33602  D KADYK, D. JAMES		34.0 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N	CITY-S' ITLE TREET CITY-SI ITLE IAME	ADDRESS			
NAME STREET ADDRESS CITY-ST-ZIP TITLE	TAMPA FL 33602  D DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120 TAMPA FL 33602  D KADYK, D. JAMES 100 N. TAMPA ST., STE. 2120		34.0 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S	CITY-S' ITLE VAME TREET CITY-SI ITLE VAME TREET	ADDRESS -ZIP ADDRESS			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TAMPA FL 33602  D DELESIE, J. CRAIG JR. 100 N. TAMPA ST., STE. 2120 TAMPA FL 33602  D KADYK, D. JAMES		34.0 4.1 T 4.2 h 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C	OTY-S' ITLE TREET OTTLE TREET TREET TREET	ADDRESS -ZIP ADDRESS			

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 of 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 Appropriation of the ecceiver 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, br on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MUELLER, JOHN H

TAMPA FL 33602

100 N. TAMPA ST., STE. 12120

813)226-1880