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

Mailing Address

2285 W EAU GALLIE BLVD

MELBOURNE FL 32935

## DOCUMENT # P97000057333

1. Corporation Name

Principal Place of Business

2285 E EAU GALLIE BLVD

MELBOURNE FL 32935

EAU GALLIE PROPERTIES, INC.

US			•				3. Date Incorporated or Qualifed 06/30/1997			
		1 -	NA-W Address				4. FEI Number Applie	d For		
2. Principal Place of Business			2a. Mailing Address					pplicable		
1			26				<b>\$8.75</b> Addi	itional		
Suite, Apt. #, etc.							5. Certificate of Status Desired Fee Requi	red		
27			Olt B Otato				6. Election Campaign Financing \$5.00 Ma	ıv Be		
_ City & State			City & State	/ & State			Trust Fund Contribution  Added to Fees			
3		28	<b>-</b>	Country			8. This corporation owes the current year Intangible	-		
Zip .	Country	1	Zip	_ `	y		Personal Property Tax.	No		
4 25 29 30				<u>'l                                      </u>			10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Regi	stered Agent	81	1 1	Name	10. Hullo Blig House			
			*	"	1					
WRIGHT, SCOTT 2285 W EAU GALLIE BLVD							ddress (P.O. Box Number is Not Acceptable)			
MELBOURNE FL 32935				83	3			A 18		
				84	1	City	85 Zip Coo	de		
				i -	- 1	•	FL S 2			
office or re agent. I ar	egistered agent, or both, in the State of maintain with, and accept the obligation	f Flor ons c	f, Section 607.0505, Florid	la Statute	s.		oration submits this statement for the purpose of changing its remain's board of directors. I hereby accept the appointment as regis			
SIGNATURE	Signature, typed or printed name of registered agent	and tit	e if applicable. (NOTE: R		ent si	ignature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	5 IN 12		
12.	OFFICERS AND	DIR	ECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS CHANGES	Addition		
TITLE	D		☐ DELETE	1.1 TITLE	•			_		
NAME	CHILDRESS, HUBERT C JR			1.2 NAME	E					
	2285 W EAU GALLIE BLVD			1.3 STRE	ET A	DDRESS				
STREET ADDRESS	MELBOURNE FL 32935			1.4 CITY-ST-ZIP		ZIP		- Addition		
CITY-ST-ZIP	D				2.1 TITLE		Change	Additio		
TITLE	CHARPENTIER, STEPHEN G			2.2 NAME	E					
NAME				2.3 STRE	FT A	ODRESS				
STREET ADDRESS	2285 W EAU GALLIE BLVD			2. 4 CITY-ST-ZIP						
CITY-ST-ZIP	MELBOURNE FL 32935		[ ] DELETE	3.1 TITLE			☐ Change	Additio		
TITLE	D			3.2 NAM			•			
NAME	WRIGHT, SCOTT					LIDODECC				
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP	MELBOURNE FL 32935		- Decem	3.4. CITY		-ZiP	Change	Additio		
TITLE	D		☐ DELETE	4.1 TITUS						
NAME	WILLIAMS, M H			4. 2 NAN						
STREET ADDRESS	27 E HIBISCUS BLVD STE A					ADDRESS				
CITY-ST-ZIP	MELBOURNE FL 32901			4.4 CITY		ZIP	Change	Additio		
TITLE			☐ DELETE	5.1 TITL			,	_		
NAME	Į.			5.2 NAV						
STREET ADORESS	s					ADDRESS				
CITY-ST-ZIP	1			5.4 CITY		- ZIP	C Change	Addition		
TITLE			☐ DELETE	6.1 TITL	Æ		Change			
NAME				6.2 NAM	ΜE					
				6.3 STR	REET	ADDRESS				
STREET ADDRESS	1			6.4 CIT	Y-ST	-ZIP		f · • ! -		
CITY-ST-ZIP.	sortify that the information supplied w	ith thi	s filing does not qualify for	the exem	nptic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further certify that the in	iormation am an		
CITY-ST-ZIP	cortify that the information supplied w		te stop omnowered to ex	the exem	nptio	on stated in S my signature	Section 119.07(3)(i), Florida Statutes. I further certify that the in re shall have the same legal effect as if made under oath; that I uired by Chapter 607, Florida Statutes; and that my name appearance.	forma am ar ars in		

SIGNATURE:

WED OF BEINTED NINE OF SECURING OFFICER OR DIRECTOR

1/7/59

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 

DO NOT WRITE IN THIS SPACE

01-22-1999 90086 027 \*\*\*150.00

461 723-/597 Daytime Phone # R2E034 (11/98)