Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90171 029 ***150.00

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

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700058640

1. Corporation Name

кепн в	ROTHERS, INC.						
Principal Plac	e of Business	Mailing Address	·			I BIÑEL BOIL ION	
116 CITRUS LANE 116 CITRUS LANE							
PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32			082		DO NOT WORK IN THE SPACE	NO MOT WIGHT IN THE OPPOSE	
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					07/03/1997		
2 Principal P	lace of Business	2a. Mailing Address				priled For	
21	lace of Edulinos	26				lot Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				_ \$8.75	A Iditional	
27		27			5. Certificate of Status Desired Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added	tc Fees	
Zip	Cour try	Zip	Country		8. This corporation owes the current year intangible	•e.	
24	25		30		Persor al Property Tax.	No	
	9. Name and Address of Currer	t Registered Agent	81	Name -	10. Name and Address of New Registered Agent		
KIRSCHNER, MAIN, GRAHAM, TANNER&DEMONT, PA				F	Edward A. Keith		
ONE INDEPENDENT DR., STE. 2000			82		ress (P.O. Box Number is Not Acceptable)	-	
JACKSONVILLE FL 32202			83	1/(2	Citrus Lane		
0,01	NOONVILLE I'E OEENE		03			ľ	
			84	City	nte Vedra Beach FL 85 Zip	Code	
11. Pursuant to the provisions of Sc ctions 607.0502 and 607.1508, Florida Statutes,					onte Vedra Beach FL 3	2082	
office or r	agistored agent or hold in the State	of Florida, Such change was aut	horized by	the corporation	on's board of cirectors. It hereby accept the appointment as r	egistered	
agent. ⊨a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florid	da Statutes		,		
SIGNATURE	Signature, typed or printed na ne of registered and	Fand title if applicable. (NOTE: F		t aireanture ton con	ed when reinstating) ### ### ############################		
12.		IL) DIRECTORS	13.	ii signatora rado rad	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	OF S IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change		
NAME	KEITH, EOWARD A		1.2 NAME			:	
STREET ADDRESS	ALC CUMPLIC LAND		1.3 STREET	ADDRESS			
CITY-ST-ZIP	DON'TE VEDDA DEACH EL AGONS		14 CITY-S	T-ZIP			
TITLE	D DELETE		2.1 TITLE		Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS	DAN KEITH 3847 ANDERSON	ND	2.3 STREET	ADDRESS		ł	
CITY-ST-ZIP	MOLLOW ON 4	3/50	2.4 CITY-S	IT-ZIP			
TITLE	DELETE		3.1 TITLE		☐ Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			34. CITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE	i	☐ Change	☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS		}	
CITY-ST-ZIP			4 4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition	
NAMÉ			5.2 NAME				
STREET ADDRES S			5.3 STREET				
CITY-ST-ZIP			54 CITY-S	T- ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	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 indicate i 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

SIGNATURE: Educato Q. Los Educato A. Leith
SIGNATURE SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 280-42.39