FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90181 042 ***150.00

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 # **P97000064455**

1. Corpora ion Name

CHARLES P. SERNECK PROPERTIES, INC.

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Principal Place of Business				М	Mailing Address												
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											Data Is				O OI AOL		
												corporated or 1997	Qualifeo	ļ			
2. Principal Place of Business					2a. Mailing Address						4. FEI Number				$-\Gamma$	App	ied For
21				26							59-3481429				Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.								\aairad		\$8.7	75 Ac	ditional
22				27	27						Ceruic	ite of Status [zesireu		_ Fe	e Req	uired—
City & S ate				+	City & State						6. Election Campaign Financing \$5.00 M						lay Be
23				28	28						Trust F	und Contribut	ion		Add	led to	Fees
Zip	Zip Country				Zip Cou			ountry			8. This corporation owes the current year Intangible						
24	25			29	29 30						Personal Property Tax.						
	9. Name	and Add	ess of Current	Regi	stered Agent		$oxed{oxed}$			10.	Name	and Address	of New	Registere	<u>d Agent</u>	'	
05:50	NEO/ 011	401 FA B					81	Na	me								
SERNECK, CHARLES P								82 Street Addre			O. Box	Number is No	ot Accept	table)			
1169 LAZY LAKE RD W										•							
DUNEDIN FL 34698							83										
							84	Cit							. 85	Zip Co	nde
							04	Cit	у					F		Lip O	~~
office crn	egistered ac	ient, or bot	h, in the State o	of Flori	607.1508, Florida Statu ida. Such change was a f, Section 607.0505, Fk	∷uthorize	d by	the c	ned con orporati	poration ion's bo	submi ard of o	ts this stateme cirectors. I her	ent for the eby acce	e purpose of the purp	of changing cintment a	g its r is regi	egistered stered
SIGNATURE	Signature, typed	or printed na	ne of registered agen	t and title	e if applicable. (NOT	l:: Registere	d Ager	it signa	ture requir	red when re	instating)			DATE			
12.			OFFICERS AN	DIR		13.				,	ADDITIO	NS/CHANGE	S TO O	FFICERS /			
TITLE	P				☐ DELETE	1.1 7	TLE								☐ Cha	nge	☐ Addition
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TITLE					☐ DELETE	3.11	TILE								Cha	nge	Addition
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NAME						5.21	AME										
STREET ADDRESS						535	STREE	T ADDR	ESS								
CITY-ST-ZIP						540	CITY-S	T-ZIP									
TITLE					☐ DELETE	6.17	TITLE								☐ Cha	nge	Addition
	i								- 1								

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 recuired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attach gent with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP