Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

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 # P97000072642

2. Principal Place of Business

City & State

21 34602 CATTAIL

CONTINENTAL MANAGEMENT CORPORATION, INC.

Principal Place of Business	Mailing Address	
34602 CAHAIL DR	34602 CATTAIL DR	
EUSTIS FL 32736-228	EUSTIS FL 32736-28	
US	US	•

2a. Mailing Address

Suite, Apt. #, etc.

City & State

26

27

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90084 029 ***150.00



DO NO	Т	WRITE	IN	THIS	SPACI
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3. Date incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

08/20/1997

59-3464908

4. FEI Number

23 = 4 ST Zip	is FL	28	28				Trust Fund Contribution Added to Fees					
		- "	Zip Country			8. This corporation owes the	ne current year	Intangible				
24 32736-	2228 25 U	S A 29	29 32736-2228 30				Personal Property Tax.		Yes [□No		
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
					81	Name				1		
VAHEY, JOHN P JR. 34602 CATTAIL DR EUSTIS FL 32736-2228					82	82 Street Address (P.O. Box Number is Not Acceptable)						
						Silesti italises (i italises i						
					83	83						
						City			. 85 Zip C	ode		
						City		F	L 83 210 C			
11. Pursuant	to the provisions of Section	ons 607.0502 and	607.1508, Florid	da Statutes,	the above	-named	corporation submits this statement t	or the purpose	of changing its r	egistered		
office or re	egistered agent, or both, i m familia with and accer	in the State of Fio of the obligations	rion. Such chang	ge was autho 0505, Florida	orized by Statutes,	tne corp	poration's board of directors. I hereby	accept the app	ointment as reg	istered		
GIGNATURE	John	P. Va		P				1/	6 19°	} ∣		
SIGNATURE	Signature, typed or printed name or	f registered agent and tift	_ 1		jistered Agen	t signature	required when reinstating)	DATE				
12.	OF	FICERS AND DIF	RECTORS		13.		ADDITIONS/CHANGES 1	O OFFICERS	AND DIRECTOR	S IN 12		
TITLE	D		□ DE	ELETE	1.1 TITLE		D.		Change	☐ Addition		
NAME	VAHEY, JOHN P JR.				1.2 NAME		VALEY, JOHN P	, IC.	•	1		
STREET ADDRESS	1745 E. LINE ST., #1	103			1.3 STREET	ADDRESS	34602 CATTAIL T	prive	_	1		
CITY-ST-ZIP	LEESBURG FL 34748	3-7044			1.4 CITY-ST	-ZIP	UAhey, John F 34602 CATTAIL T EUSTIS, FL 327	36-22	al	}		
TITLE			☐ DE	ELETE	2.1 TITLE		,		☐ Change	Addition		
NAME					2.2 NAME							
STREET ADDRESS					2.3 STREET	ADDRESS						
CITY-ST-ZIP					2.4 CITY-S	T-ZIP		-		. }		
TITLE			□ DE	ELETE	3.1 TITLE				☐ Change	Addition		
NAME					3.2 NAME					İ		
STREET ADDRESS					3.3 STREET	ADDRESS						
CITY-ST-ZIP					34. CITY-S1	r-zip						
TITLE			□ OE	ELETE	4.1 TITLE				☐ Change	☐ Addition		
NAME					4. 2 NAME							
STREET ADDRESS					4.3 STREET	ADDRESS			•			
CITY-ST-ZIP			_		4.4 CITY-ST	-ZIP			<u> </u>			
TITLE	-			ELETE	5.1 TITLE				Change	☐ Addition		
NAME					5.2 NAME		1					
STREET ADDRESS					5.3 STREET	ADDRESS						
CITY-ST-ZIP					5.4 CITY-ST	-ZIP						
TITLE			☐ DE	LETE	6.1 TITLE				Change	Addition		
NAME					6.2 NAME					ſ		
STREET ADDRESS	.*				6.3 STREET	ADDRESS						
CITY-ST-ZIP					6.4 CITY-ST	-ZIP						

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 suppliemental 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 corpolation 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 or on an attachment with an address, with all other like empowered.