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

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

103 COMMERCE STREET



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075177

ZACHARY TAYLOR HOLDINGS INC.

Mailing Address

P.O. BOX 950181 LAKE MARY FL 32795-0181

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90038 049 ***150.00



LAKE MARY FL 32746 3. Date Incorporated or Qualified 08/28/1997	
A CEL Number	Applied For
2 Principal Place of Business Za. Walling Address	Not Applicable
21 APPLIED FOR	
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired	\$8.75 Additional
	Fee Required
	55.00 May Be
Trust Fund Contribution	Added to Fees
23 20 20 20 20 20 20 20 20 20 20 20 20 20	vear Intangible
<u></u>	Yes No
24 25 29 30 Personal Property Tax.	
9. Name and Address of Current Registered Agent 10. Name and Address of New Regis	Stered Agent
81 Name	1
ANDERSON, KURT L 82 Street Address (P.O. Box Number is Not Acceptable)	1
1793 OAKBROOK DR	,
LONGWOOD FL 32779	201 (CIP-164) 6, 21 (PR) (ARIE 164) 1681
LONGWOOD FL 32779	[[] [[] [[] [] [] [] [] [] [] [] [] [] [
84 City	85 Zip Code
	FL
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur	pose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of the pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes.	ne appointment as registered
be office or registered agent, or both, in the state of Florida. Such change was authorized by the object the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE	DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: registered Agent Synature (VIDE: Registered Agent Synature)	
12. Of FIGURE SHILES FOR	Change Addition
TITLE DP DELETE LITTLE	☐ Citatige ☐ Madigoti }
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NAME ANDERSON, RUN L	
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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 reserver 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE