

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 10, 1999 8:00 am
Secretary of State

08-10-1999 90016 029 ***550.00

DOCUMENT # **P97000075905**

1. Corporation Name

STONIER INFORMATION GROUP, INC.



Principal Place of Business

**2315 BEACH BOULEVARD
SUITE 104
JACKSONVILLE BEACH FL 32250**

Mailing Address

**2315 BEACH BOULEVARD
SUITE 104
JACKSONVILLE BEACH FL 32250**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1997

2. Principal Place of Business

21 3131 ST. JOHNS BLUFF RD.

2a. Mailing Address

26 3131 ST. JOHNS BLUFF RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 JACKSONVILLE, FLORIDA

City & State

28 JACKSONVILLE, FLORIDA

Zip

24 32246

Country

25 USA

Zip

29 32246

Country

30 USA

4. FEI Number

59-3508720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**STEELE, ALLEN J
2315 BEACH BOULEVARD
SUITE 104
JACKSONVILLE BEACH FL 32250**

10. Name and Address of New Registered Agent

81 Name MICHAEL P. WILLIAMS, ESQ.

**82 Street Address (P.O. Box Number is Not Acceptable)
3131 ST. JOHNS BLUFF RD**

83

84 City JACKSONVILLE FL 85 Zip Code 32246

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8-2-99

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **STEELE, ALLEN J**
STREET ADDRESS **2315 BEACH BOULEVARD, SUITE 104**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**

TITLE **TD** ☐ DELETE

NAME **DAVE, STEPHEN**
STREET ADDRESS **2315 BEACH BOULEVARD, SUITE 104**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**

TITLE **SD** ☐ DELETE

NAME **JOHNSON, GARY L.**
STREET ADDRESS **2315 BEACH BOULEVARD, SUITE 104**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **3131 ST. JOHNS BLUFF ROAD**
1.4 CITY-ST-ZIP **JACKSONVILLE, FL 32246**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS **3131 ST. JOHNS BLUFF ROAD**
2.4 CITY-ST-ZIP **JACKSONVILLE, FL 32246**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS **3131 ST. JOHNS BLUFF ROAD**
3.4 CITY-ST-ZIP **JACKSONVILLE, FL 32246**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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.

SIGNATURE:

STEELE, ALLEN J

AUGUST 3, 1999 (904) 249-2010

CR2E034 (5/99)