## 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 # P97000076562

1. Corporation Name

THE ROOSEVELT CORPORATION

Principal Place of Business Mailing Address					T 1881/1881 118 (817) 1881 58511 491	12 Barri Austri		1111 1101 1001
866 AQUARIUS	S CIR. S.	7866 AQUARIUS CIR. S.						
ACKSONVILLE	FL 32216	JACKSONVILLE FL 32216			DO NOT WRI	TE IN THIS	SPACE	
\$ US					3. Date Incorporated or Qualifed	1 1110	- OI AOL	
					08/29/1997	IF *		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		T Apr	olied For
7		[26]			NOT APPLICABLE	· ·	<del></del>	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				-	\$8.75 A	dditional
1		27			5. Certificate of Status Desired		Fee Rec	quired
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
					Trust Fund Contribution	<u> </u>	Added to	Fees
Zip	Country	Zip	Cor	intry	8. This corporation owes the curr	ant year Int		_
.}	25		30		Personal Property Tax.			□No
	9. Name and Address of Current	t Registered Agent		04 None	10. Name and Address of New R	egistered	Agent	
1 500	DELL CAMBELL			81 Name		1		
LEPRELL, SAMUEL L				82 Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
SUITE 901 BLACKSTONE BUILDING 233 EAST BAY STREET						<del></del>		
JACKSONVILLE FL 32202				83				i
JACKSONVILLE PL 32202				84 City			85 Zip C	ode
		1007.4500 51 13 01 14		<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FL	-hanging its	ragiotarad
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida, Such change was au	ıthorized	t by the corporate	on's board of directors. I hereby accep	t the appoi	ntment as reg	istered
-	in lamilal with, and accept the congat	10115 01, 08011011 007.0300, 1 101	ida otat	utes.		;		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE.	Registered	Agent signature require	d when reinstating)	DATE		
2.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OF	ICERS AN	ID DIRECTOR	RS IN 12
TLE	D	☐ DELETE	1.1 TO	TLE		1	☐ Change	☐ Addition
AME	MCELVANEY, SEAN	INEY, SEAN		AME				
TREET ADDRESS	7866 AQUARIUS CIR. S.		1.3 \$7	REET ADDRESS	•	i i		
NY-ST-ZIP	JACKSONVILLE FL 32216		14 CI	TY-ST-ZIP				
TLE	D	DELETE	2.1 T	TLE		4	☐ Change	☐ Addition
AME	HORN, DAVID C	•	2.2 N	ME .		)		Ļ
TREET ADDRESS	7866 AQUARIUS CIR. S.		2.3 ST	REET ADDRESS		ŀ		ĺ
ITY-ST-ZIP	JACKSONVILLE FL 32216		2.4 C	ITY-ST-ZIP		#		
TLE		☐ DELETE	3.1 TI	TLE			☐ Change	☐ Addition
AME			3.2 N	WE				-
TREET ADDRESS			3.3 S1	REET ADDRESS				ļ
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AME			5.2 N					ļ
TREET ADDRESS (			5.3 ST	REET ADDRESS		1		ł

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 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.

☐ DELETE

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

011-353-1459-3189

☐ Change

☐ Addition

**FILED** 

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90136 040 \*\*\*150.00