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

Mailing Address

600 BIRD BAY DR., W. VENICE FL 34292

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000082896

Principal Place of Business 600 BIRD BAY DR., W.

VENICE FL 34292

NEDDAVIS NEWVENTURES, INC.

2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			pplied For	
21	·	26				65-0787292			lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired See Required Fee Required			
City & State		City & State					6. Election Campaign Financing	\$5.00) May Bo	
City & State		28					Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country Zip Ci			Country			8. This corporation owes the current year Intangible			
24 25 29 30							Personal Property Tax. Yes No			
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
CORPORATION SERVICE COMPANY				81	Name					
1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE FL 32301-2525				83						
IALLANAGGEE PL 02001-2020				83						
				84 City FL 85 Zip Code						
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 requ	w benit	when reinstating) DATE			
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	
TITLE	DCEO X DELETE		1,1 T	1,1 TITLE				☐ Change	☐ Addition	
NAME	,			1.2 NAME						
STREET ADDRESS	and DIPO DAY DO W			1.3 STREET ADDRESS						
	l .			1.4 C/TY-ST-ZIP						
CITY-ST-ZIP	VENICE FL 34292 VSTD □ DELETE			2.1 TITLE				[] Change	[] Addition	
TITLE	1010									
NAME	RAYMOND, GEOFFREY P			2.2 NAME						
STREET ADDRESS	000 On 10 On 11			2.3 STREET ADDRESS						
CITY-ST-ZIP				2.4 CITY-ST-ZIP					Addition	
TITLE	D DELETE			3.1 TITLE P.		P/	D	Change		
NAME	Joyner, Jerry W Jr			3.2 NAME JC		Jo	yner, Jerry W. Jr.			
STREET ADDRESS	600 BIRD BAY DR. W.									
CITY-ST-ZIP	VENICE FL 34292 3			3.4. CITY-ST-ZIP V e		ўĕ	O Bird BAy Dr. W.			
TITLE		☐ DELETE	4.1 TI	TLE			•	☐ Change	e 🗌 Addition	
NAME			4, 2 N	AME						
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CITY-ST-ZIP				TY-ST	1					
TITLE		DELETE	5,1 TI					Change	☐ Addition	
NAME			5.2 N/	ME					}	
STREET ADDRESS			5.3 \$1	REET	ADDRESS					
CITY-ST-ZIP			5.4 CI	TY-ST-	-ZIP					
TITLE		☐ DELETE	6.1 TI	TLE				Change	Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S1	REET	ADDRESS					
CITY-ST-ZIP				TY-ST-	1					
14 hereby c	ertify that the information supplied with	this filing does not qualify for	r the exe	mptic	on stated in	n Sec	ction 119.07(3)(i), Florida Statutes. I further ce	rtify that the	information	
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, with all other like empowered.										

FILED

May 05, 1999 8:00 am Secretary of State

05-05-1999 90021 015 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/24/1997

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