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 # **P97000082922** 1. Corporation Name

1509 CORP.

| Principal Place of Business | Mailing Address |
|-----------------------------|--------------------|
| 1312 COMMERCE LANE | 1312 COMMERCE LANE |

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90074 002 ***150.00



| Principal Place | of Business | Mailing Address | | | | | | | |
|---|--|------------------------------|------------------|-------------|---------------------------------------|---|----------------|----------------------|----------------|
| 1312 COMMERCE LANE 1312 COMMERCE LANE | | | | | | | | | |
| SUITE 1A JUPITER FL 33458 | | SUITE 1A JUPITER FL 33458 | | | DO NOT WEE | TE IN THIS S | DACE | | |
| | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | 3. Date Incorporated or Qualifed | | | |
| | | | | | | 09/24/1997 | | 1 1 | N |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | | ⊢ -⊢ | Applied For |
| 21 | | 26 | | | | 65-0785704 | | _ | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | 5. Certifcate of Status Desired | | | Additional | |
| 22 27 | | • • | · | | | | | Required | |
| City & State City & State | | | | | 6. Election Campaign Financing | | | May Be | |
| 23 | | 28 | | | Trust Fund Contribution Added to Fees | | | | |
| Zip | Country | Zip | Zip Country | | | This corporation owes the current year Intangible | | | |
| 24 | 25 | 29 | 29 30 | | | Personal Property Tax. ☐ Yes ☐ No | | | |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New F | Registered A | gent | |
| | | | | 81 Na | me | | | | |
| OLDI | HAM, WESLEY W | | | 82 Str | root Addre | ess (P.O. Box Number is Not Accepta | able) | | |
| 1312 | COMMERCE LANE | | | 02 311 | eet Addie | sas (F.O. Box Humber is Not Accept | м ы с) | | |
| SUITI | E 1A | | | 83 | | - | | | |
| JUPI | TER FL 33458 | | | | | | | T = T == | |
| | | • | | 84 Cit | ty | | FL | 85 Zi _l | p Code |
| 44 5 | to the provisions of Sections 607.0502 | and 607 1509 Florida Stat | utor the a | hove nar | med como | ration submits this statement for the | numose of ch | nanging i | its registered |
| office or re | to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati | if Florida. Such change was | authorized | i by the d | corporation | n's board of directors. I hereby accep | pt the appoint | ment as | registered |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable (NO | TE: Registered | Agent signa | ture required | when reinstating) | DATE | | |
| 12, | OFFICERS AND | | 13. | | i . | ADDITIONS/CHANGES TO OF | FICERS AND | DIRECT | TORS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 TI | TLE | | | | ☐ Chang | |
| ĺ | OLDHAM, WESLEY W | | 1.2 N | AMF | | | | | Ì |
| NAME | 1312 COMMERCE LANE SUITE | : 14 | | REET ADDR | 2500 | • | | | t I |
| STREET ADDRESS | | in. | | | 230 | | | | |
| CITY-ST-ZIP | JUPITER FL 33458 | ☐ DELETE | 1.4 CI 2.1 Ti | TY-ST-ZIP | | | | Chang | e Addition |
| ΠīLĒ | SVTD | | | | | | | | _ |
| NAME | WILSON, RUSSELL | | 2.2 N | | | | • | | |
| STREET ADDRESS | 1312 COMMERCE LANE SUITE | : 1A | 2.3 \$7 | TREET ADDF | RESS | | | | i |
| CITY-ST-ZIP * | -JUPITER FL 33458 | | | ITY-ST-ZIP | | | <u>.</u> | Chana | e Addition |
| TITLE | | ☐ DELETÉ | 3.1 TT | TLE | ļ | | | Chang | e L'addinois |
| NAME | | | 3.2 N/ | AME | | | | | |
| STREET ADDRESS | | | 3.3 S | TREET ADDR | RESS | | | | 1 |
| CITY-ST-ZIP | | | 3.4. C | ITY-ST-ZIP | | | | | |
| TITLE | | . DELETE | 4.1 TI | TLE | | | | Chang | e Addition |
| NAME | | | 4. 2 N | AME | | | | | |
| STREET ADDRESS | | | 4.3 \$ | TREET ADD | RESS | | | | |
| CITY+ST-ZIP | | | 4.4 C | TY-ST-ZIP | ļ | | | | |
| TITLE | | ☐ DELETE | 5.1 TI | | | | | Chang | e |
| NAME | | | 5.2 N | | | | | | |
| | | | 5.3 S | TREET ADDI | RESS | | | | |
| STREET ADDRESS | | | | ITY-ST-ZIP | | | | | |
| CITY-ST-ZIP | | DELETE | 6.1 1 | | | | | Chang | e |
| TITLE . | parties of the transfer | | 6.2 N | | | | | | |
| | Balan E. A | • | | | nree | | | | . |
| STREET ADDRESS | | | | TREET ADD! | RESS | | | | . |
| CITY ST 7ID | | | 6.4 C | ITY-ST-ZIP | - 1 | | | | |

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 supplements 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 coloration of 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 chapter 607 attachment with an address, with all other like empowered.

04/09/99

561/746-7429