

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

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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90009 037 ***150.00

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PROFIT
 CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # P97000093405

1. Corporation Name
SACRED BRIDGE, INC.

Principal Place of Business
 11586 162ND PL. N.
 JUPITER FL 33478

Mailing Address
 11586 162ND PL. N.
 JUPITER FL 33478



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/30/1997	
4. FEI Number 65-0792613	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 958 NW 13th ST	2a. Mailing Address 958 NW 13th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State STUART, FL	City & State STUART, FL
Zip 34994	Zip 34994
Country US	Country US

9. Name and Address of Current Registered Agent HALL, MARCUS E JR. 11586 162ND PL. N. JUPITER FL 33478		10. Name and Address of New Registered Agent	
81 Name HALL, MARCUS E JR.	82 Street Address (P.O. Box Number is Not Acceptable) 958 NW 13th St.	83	84 City STUART
85 Zip Code 34994	86 State FL		

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 *Marcus E Hall* **4/24/99**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PALMER, KELLY H		1.2 NAME PALMER, KELLY H	
STREET ADDRESS 11586 162ND PL. N.		1.3 STREET ADDRESS 958 NW 13th St.	
CITY-STATE-ZIP JUPITER FL 33478		1.4 CITY-STATE-ZIP STUART FL 34994	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ANDERSEN, ARRONEL		2.2 NAME ANDERSEN, ARRONEL	
STREET ADDRESS 11586 162ND PL. N.		2.3 STREET ADDRESS 958 NW 13th St.	
CITY-STATE-ZIP JUPITER FL 33478		2.4 CITY-STATE-ZIP STUART, FL 34994	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HALL, MARCUS E JR.		3.2 NAME HALL, MARCUS E JR	
STREET ADDRESS 11586 162ND PL. N.		3.3 STREET ADDRESS 958 NW 13th St	
CITY-STATE-ZIP JUPITER FL 33478		3.4 CITY-STATE-ZIP STUART, FL 34994	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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, with all other like empowered.

SIGNATURE: *Marcus E Hall* **MARCUS E HALL JR** **4/24/99**
Signature and typed or printed name of signing officer or director Date

CR2E034 (11/98)

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