**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000098156

1. Corporation Name

TAYLOR & SHILLING, P.A.

Principal Place of Business	Mailing Address			
900 east Indiantown Road. Ste. 301	900 EAST INDIANTOWN ROAD. STE. 30			
Jupiter Fl 33477	JUPITER FL 33477			

## May 07, 1999 8:00 am Secretary of State

05-07-1999 90014 033 \*\*\*150.00



Principal Place of Business Mailing Address					1 (69)/881 (10 (9)(1 (90)) 99)(1 69)(1 60)(1 90)(1	. 1878) 18187 1168	il Biich Arii (Abi	
900 EAST INDIANTOWN ROAD. STE. 301 900 EAST INDIANTOWN ROAD JUPITER FL 33477 900 EAST INDIANTOWN ROAD JUPITER FL 33477		oad. Ste.	301		DO NOT WRITE IN THIS	S SPACÉ		
						3. Date Incorporated or Qualifed		
			_			11/17/1997	<del></del>	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<b>⊢</b> +−	pplied For
21		26				65-0800891		ot Applicable Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		lequired
City & State	Ð	City & State	_			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip 29	Cour	ntry		This corporation owes the current year In Personal Property Tax.	ntangible	™No
24	9. Name and Address of Curren		30			10. Name and Address of New Registered	Agent	
	5. Name and Address of Curren	t registered rigent		81	Name			
SHILLING, SUSAN L 900 EAST INDIANTOWN ROAD, STE. 301			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	EAST INDIANTOWN ROAD, STE. TER FL 33477	301		83				
30,1	TENTE SOATT							
				84	City	FI	85 Zip	Code
office or re	egistered agent, or both, in the State m familiar with, and accept the obligation Signature, typed or printed name of registered age	of Florida. Such change was a tions of, Section 607.0505, Florida.	autnonzed orida Statu	by ites.	the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint when reinstating)  DATE	intment as r	egisiered
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TIT	LE			☐ Change	
NAME	TAYLOR, DAVID F		1.2 NA	ME				
STREET ADDRESS	900 EAST INDIANTOWN RD	STE 301	1.3 STF		ADDRESS			
CITY-ST-ZIP	JUPITER FL 33477		1.4 CITY-		T-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	SHILLING, SUSAN L	HILLING, SUSAN L 22 N		ME				
STREET ADDRESS	900 EAST INDIANTOWN RD STE 301		2.3 ST	REET	TADORES\$			
CITY-ST-ZIP	JUPITER FL 33477		2. 4 CI		IT-ZIP		☐ Change	Addition
TITLE		☐ DELETE	3.1 गा				Change	Addison
NAME			3.2 NA					\
STREET ADDRESS					TADORESS			
CITY-ST-ZIP		DELETE	3.4. CI 4.1 TII		SI-ZIP		☐ Change	Addition
TITLE NAME		E3 5000.0	4.2 N					
STREET ADDRESS					ADDRESS			ļ
	÷		4.4 CI		1			
CITY-ST-ZIP TITLE	, ,	☐ DELETE	5.1 TI				Change	Addition
NAME	. *		5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET	T ADDRESS			
CITY-ST-ZIP			5.4 CI	TY-S	T-ZIP			
TITLE		☐ DELETE	6.1 Ti	īΕ		_	☐ Change	e
NAME			6.2 NA					j
	1		6.3 ST	REF	T ADDRESS			}

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR