FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90011 024 \*\*\*150.00

Mailing Address

3030 HARTLEY ROAD

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000100242

1. Corporation Name

Principal Place of Business

3030 HARTLEY ROAD

VESTCOR PARTNERS XII, INC.

SUITE 100 JACKSONVILLE FL 32257		SUITE 100 JACKSONVILLE FL 32257				DO NOT WRITE IN THIS SPACE				
						·	Incorporated or Quali	fed		
	<u></u>						25/1997	<u></u>		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI I				plied For	
21		26			59-3	<u>3479480                                    </u>			t Applicable	
Suite, Apt.	t, etc.	Suite, Apt. #, etc.			5 Certi	fcate of Status Desired	# <b></b>	\$8.75 A		
		27			J. Octa			Fee Re	c uired	
City & State		City & State		6. Elect	tion Campaign Financi	ng 🖂	\$5.00	May Be		
23		28	28			Trus	t Fund Contribution		Added t	c Fees
Zip	Courtry	Zip	Cour	ntry		8. This	ccrporation owes the	current year int	angible	_
24	25	29	30			Pers	or al Property Tax.		☐ Yes	[]No
	9. Name and Address of Curren	Registered Agent				10. Nam	e and Address of Ne	w Registered	Agent	
				81	Name					:
FARRELL, MARK T			-	82	Stroot	Acdress (P.O. B.	ox Number is Not Acc	entable)		
3030	HARTLEY ROAD			اء"	SHEEL	Acdress (F.O. D	OX NUMBER IS NOT ACC	срвавіс)		Į
SUITE 100				83						
JACK	SONVILLE FL 32257								T	
				1	City			FL	85 Zip (	
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the at	ove-i	named	corporation sub-	mits this statement for	the purpose of	changing its	registered
office or re	gistered agent, or bo h, in the State of familiar with, and accept the obligat	of Florida, Such change was	authorized	by th	e corpo	oration's board o	of cirectors. I hereby ac	cept the appoi	ntment as re	g stered
	n janiniai willi, and accept the obligat	THIS OI, Section our .0000, 17	inida Otalo	100.						į
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable (NOT	Registered	Agent s	signature r	equired when reinstating	ng)	DATE		
12.	OFFICERS AN		13.				TIONS/CHANGES TO	OFFICERS AN	ND DIRECTO	F:S IN 12
TITLE	D	☐ DELETE	1.1 HT	LE		DP			Change	Addition
NAME	ROOD, JOHN D		1.2 NA	ME		ROOD, J	OHN D.			i
STREET ADDRESS	3030 HARTLEY ROAD		13.ST	REETA	DDRESS	3030 HA	ARTLEY ROAD	D, SUIT	PE 100	
	JACKSONVILLE FL 32257			1.4 CITY-ST-ZIP		I.	WILLE, FL	32257		
CITY-ST-ZIP TITLE	VS	☐ DELETE	2.1 TIT		CII.	3-10-11-0-11			Change	Addition
	FARRELL. MARK T		22 NA							_
NAME	3030 HARTLEY ROAD, SUITE	100			200500					ı
STREET ADDRE 3S		100			DDRESS					
CITY-ST-ZIP	JACKSONVILLE FL 32257	☐ DELETE		TY-\$T-	ZIP				★ Change	Addition
TITLE	1	☐ DELETE	3.1 TIT			VT	DEDMAND D		∠ Change	
NAME	SMITH, BERNARD E		3.2 NA				BERNARD E			l
STREET ADDRE 3S	3030 HARTLEY ROAD SUITE	100	3.3 ST	REETA	DDRESS		ARTLEY ROA	•		1
C/TY-ST-ZIP	JACKSONVILLE FL 32257		3.4. CI	TY-ST-	ZIP	<u>JACKSO1</u>	NVILLE, FL	3225		
TITLE	V	☐ DELETE	4.1 TIT	LE					☐ Change	☐ Addition
NAME	PACKARD, KRISTEN K		4.2 NA	ME						
STREET ADDRE 3S	3030 HARTLEY ROAD SUITE	100	4 3 ST	REETA	DDRESS					
CITY-ST-ZIP	JACKSONVILLE FL 32257		4.4 CIT	Y-ST-Z	ZIP					
TITLE	<u> </u>	☐ DELETE	5.1 TIT	ŲĘ.					☐ Change	Addition
NAME			5 2 NA	ME						
STREET ADDRESS			5.3 ST	REETA	DDRESS					ļ
CITY-ST-ZIP			5.4 CIT	Y-ST-2	ZIP					
TITLE		☐ DELETE	6.1 TIT	LE		<u> </u>			Change	Addition
NAME			6.2 NA	ME					- •	
			6.3 STI	REETA	DDRESS	}				
STREET ADDRESS						[				

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 accurate 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 attach nent with an address, with a lighter like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

MARK T. FARRELL

4-23-99

(904)260-3030