

1ST IS \$650.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**

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

FILED

99 MAR 19 AM 9:13

 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # P97000105629

 1. Corporation Name  
 FDY, INC.

## Principal Place of Business

 4925 VERDIS ST  
 JACKSONVILLE FL 32258  
 US

## Mailing Address

 4925 VERDIS STREET  
 JACKSONVILLE FL 32258

DO NOT WRITE IN THIS SPACE

## 3. Date Incorporated or Qualified

12/15/1997

## 4. FEI Number

APPLIED FOR 59-3492205

## Applied For

Not Applicable

## 5. Certificate of Status Desired

☐
 \$8.75 Additional  
 Fee Required
6. Election Campaign Financing  
Trust Fund Contribution☐
 \$5.00 May Be  
 Added to Fees
8. This corporation owes the current year Intangible  
Personal Property Tax☐ Yes ☐ No

## 2. Principal Place of Business

21 Suite, Apt. #, etc.

22 9400 Atlantic Blvd #24

23 Jacksonville FL

24 32225 25 Country

## 2a. Mailing Address

26 Suite, Apt. #, etc.

27

28 City &amp; State

29 Zip Country

30

## 9. Name and Address of Current Registered Agent

 HEAD, KOKO  
 2970 HARTLEY ROAD  
 SUITE 104  
 JACKSONVILLE FL 32257

## 10. Name and Address of New Registered Agent

## 81 Name

## 82 Street Address (P.O. Box Number is Not Acceptable)

## 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 required when re-registering)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
 NAME YORK, FRANCES  
 STREET ADDRESS 4925 VERDIS STREET  
 CITY-STATE-ZIP JACKSONVILLE FL 32258
TITLE VP ☐ DELETE
 NAME YORK, DOUGLAS V  
 STREET ADDRESS 4925 VERDIS STREET  
 CITY-STATE-ZIP JACKSONVILLE FL 32258
TITLE ☐ DELETE
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP
TITLE ☐ DELETE
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP
TITLE ☐ DELETE
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP
TITLE ☐ DELETE
 NAME  
 STREET ADDRESS  
 CITY-STATE-ZIP

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

## 12 NAME

## 13 STREET ADDRESS

## 14 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

## 2.2 NAME

## 2.3 STREET ADDRESS

## 2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

## 3.2 NAME

## 3.3 STREET ADDRESS

## 3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

## 4.2 NAME

## 4.3 STREET ADDRESS

## 4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

## 5.2 NAME

## 5.3 STREET ADDRESS

## 5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

## 6.2 NAME

## 6.3 STREET ADDRESS

## 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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-19-99

004805

CR2034 (11/98)