## 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

## **FILED** May 10, 1999 8:00 am Secretary of State

05-10-1999 90223 045 \*\*\*150.00

## DOCUMENT # P9800000274

ALEXANDER READ INVESTMENT MANAGEMENT, INC.

Principal Place of Business

Mailing Address

2968 BOWER R WINTER PARK			
MINICH FARK	TE 32/32 WHITE TANK TE 32/32		DO NOT WRITE IN THIS SPACE
			Date Incorporated or Qualifed     01/02/1998
2. Principal Place of Business 21 111 E. FAIRBANKS AVE. 26 111 E. FAIRBANK			4. FEI Number X Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 STE . 100			5. Certificate of Status Desired   \$8.75 Additional Fee Required
City & State  23 WINTER PARK, FL 28 WINTER PARK			6. Election Campaign Financing  Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip 24 327	89 25 USA 29 32789 30	Country	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No
•	Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
BEAD ALEVANDED			
READ, ALEXANDER 2968 BOWER RD			ddress (P.O. Box Number is Not Acceptable)
WIN	TER PARK FL 32792	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			
- OIGHAT GIVE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg	istered Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELETE	1.1 TITLE	PRESIDENT Change Aladdition
NAME		1.2 NAME	ALEXANDER KEAU
STREET ADDRESS	ي د معتبد المعادل	1.3 STREET ADDRESS	ALEXANDER READ 2968 BOWER RD. WINTER PARK, FL 32792—
CITY-ST-ZIP	□ pc. etc	1.4 CITY-ST-ZIP	WIMER PARK, FL 30 192-
TITLE	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	U DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME	_ OLLEGE	4.2 NAME	Counties Civature.
		4.3 STREET ADDRESS	
STREET ADDRESS			
TITLE	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
			Section 119 07/3\(i) Florida Statutes I further certify that the information

Interept 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 informatic 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 of 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 the analysis ment with approaches with all other like empowered.

SIGNATURE:

G OFFICER OR DIRECTOR

Daytime Phone #