

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
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90119 025 ***150.00

DOCUMENT # P98000001131

1. Corporation Name

STERLING CAPITAL INVESTMENTS, INC.

Principal Place of Business
2105 GOWELL BRANCH ROAD
MAITLAND FL 32751

Mailing Address
2105 GOWELL BRANCH ROAD
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1998

4. FEI Number

59-3485829

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 1075 West Morse Blvd

Suite, Apt. #, etc.

22

City & State

23 WINTER PARK, FLORIDA

Zip

24 32789

Country

25 USA

2a. Mailing Address

26 1075 West Morse Blvd

Suite, Apt. #, etc.

27

City & State

28 WINTER PARK, FLORIDA

Zip

29 32789

Country

30 USA

9. Name and Address of Current Registered Agent

IGLER & DOUGHERTY, P.A.
1501 OAK AVENUE EAST
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

1501 PARK AVENUE EAST

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 reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MURPHY, JOHN J
STREET ADDRESS 2105 GOWELL BRANCH ROAD
CITY-ST-ZIP MAITLAND FL 32751

TITLE PSD ☐ DELETE

NAME NAYLOR, BRUCE A
STREET ADDRESS 675 BELLA VISTA DR.
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME MURPHY, JOHN J
1.3 STREET ADDRESS 1075 West Morse Blvd.
1.4 CITY-ST-ZIP WINTER PARK, FL 32789

2.1 TITLE PSD ☒ Change ☐ Addition

2.2 NAME NAYLOR, BRUCE A.
2.3 STREET ADDRESS 1075 WEST MORSE BLVD
2.4 CITY-ST-ZIP WINTER PARK, FL 32789

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

Bruce A. Naylor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99
Date

407-975-8799
Daytime Phone #

CR2E034 (11/98)

068714