PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90266 027 ***150.00

DOCUMENT # P9800001943

1. Corporation	AND ASSOCIATES, INC.							
Principal Place	of Business	Mailing Address						
Principal Place of Business Mailing Address 9007 BRADEN RUN 9RADENTON FL 34202 BRADENTON FL 34202						DO NOT WRITE IN THI	C CDACE	
						3. Date Incorporated or Qualifed	5 SPACE	
						01/08/1998		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For
1365	IZTHST, E.	26 1365 127	1365 12TH ST.E.			65-0879828	No	t Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
City & State	-	City & State 28 PALMETTO	28 PALMETTO, FL.		6. Election Campaign Financing Trust Fund Contribution - \$5.00 May Be Added to Fees			
Zip	Country	Zip		untry		8. This corporation owes the current year II	ntangible XX Yes	□No I
4 34221 25 MANATEE 29 34221			30 M	101	NATEE	Personal Property Tax. 10. Name and Address of New Registered		LING
	9. Name and Address of Current	Registered Agent		81	Name	10. Maine and Address of New Registered	, Agent	
VANO	CE, BRIAN							
9607 BRADEN RUN				82	Street Addi	ress (P.O. Box Number is Not Acceptable)		
BRAI	DENTON FL 34202			83				,
				24	C*-		85 Zip (Code
				84 City		F	┗ Î <u> </u>	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was	authorize	of DV	the corporate	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appe	of changing its ointment as reg	registered gistered
SIGNATURE						ed when reinstation) DATE		
12	Signature, typed or printed name of registered agent		TE: Registere	<u>-</u>	t signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	OFFICERS AND DIRECTORS DELETE			11 TITLE		Noother to strate the strate to the strate t	Change	☐ Addition
NAME	VANCE, BRIAN		1.2 N	1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS			1.3 5					
CITY-ST-ZIP	BRADENTON FL 34202		1.40	1,4 CITY-ST-ZIP				
TITLE			2.1 T	TTLE			Change	☐ Addition
NAME	VANCE, LINDA	VANCE, LINDA		AME				
STREET ADDRESS			2.3 8	2.3 STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34202		2.44	2.4 CFTY-ST-ZIP				
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NAME			3.21	AME				
STREET ADDRESS			3.3 5	TREET	TADDRESS			
CITY-ST-ZIP		C priete		CITY-S	T-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 T				□ Orlange	
NAME			- 6	NAME	}			!
STREET ADDRESS					TADDRESS			
CITY-ST-ZIP		☐ DELETE		OTY-ST	r- ZIP		☐ Change	Addition
TITLE				NAME				
NAME STREET ADDRESS					T ADDRESS			
STREET ADDRESS				CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE		MLE			Change	☐ Addition
NAME			6.21	NAME			•	
STREET ADDRESS			6.3 9	STREET	TADDRESS			

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: