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

DOCUMENT # P9800006702

PRESLEY AND ASSOCIATES, INC.

Principal Place of Business

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90046 020 ***150.00



Principal Place	of Business	Mailing Address	-		1 (Editing tile sessi (etti desti detti detti antis antis astis santi santi	
516 SOUTH PLUMOSA STREET #19 516 SOUTH PLUMOSA STREET #			REET #19			
MERRITT ISLAN	D FL 32952	MERRITT ISLAND FL 32952	?		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					01/20/1998	
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
─ ,	ace of business	26			59-348 6940 Not Applicable	
21 Suite, Apt. #	¥ etc	Suite, Apt. #, etc.			\$9.75 Additional	
22	1, 0.0.	27			5. Certificate of Status Desired Fee Required	
City & State)	City & State	_		6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count		8. This corporation owes the current year Intangible	
24	25	29	30		Personal Property Tax. Yes No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent	
				81 Nat	me	
Presley, ronald wayne				82 Street Address (P.O. Box Number is Not Acceptable)		
	south plumosa street #19	9		77		
MERI	RITT ISLAND FL 32952			83		
				84 Cit	v 85 Zip Code	
					' FL <u> </u>	
11. Pursuant t	o the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the a	ove-nan	ned corporation submits this statement for the purpose of changing its registered	
office or re	egistered agent, or both, in the State	e of Florida. Such change was a ations of Section 607.0505. Flo	uthorized rida Stati	by the c ites.	corporation's board of directors. I hereby accept the appointment as registered	
	Roy 11 4 Pa	11000			2/9/99	
SIGNATURE	Signature, typed or printed name of registered age	ent and title (applicable. (NOTE	Registered	Agent signa	ture required when reinstating) DATE	
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		☐ DELETE	1.1 TI	LE	RONALD W. Presley, Pres Change Addition	
NAME			1.2 N	ME	SILO SO. Plumosa ST., #19 Merritt Island, FL 32954 VAREN S. Presley KAREN S. Pumosa ST., #19	
STREET ADDRESS			1.3 \$1	REET ADDR	Maratt Tala 1 To 226 CM	
CITY-ST-ZIP				TY-ST-ZIP	Change Addition	
TITLE		☐ DELETE	2.1 TI	LE	Change (Auditori	
NAME			2.2 N	ME	KATEN S. Prestey	
STREET ADDRESS			2.3 \$1	REET ADDR	ESS 576 SO. Pumosa SI, FI	
CITY-ST-ZIP			2.4 C	TY-ST-ZIP	Merrit Island, PL 3243.4	
TITLE		☐ DELETE	3.1 TI	ILE .	Change Addition	
NAME			3.2 N	ME	KArol S. Woody	
STREET ADDRESS			3.3 \$7	REET ADDR	KArol S. Woody 150 So. Sykes Creek PKWy; #710 Merritt Island, FL 32952	
CITY-ST-ZIP			34 C	TY-ST-ZIP	Merritt Island, FL 32952	
TITLE		☐ DELETÉ	4.1 TI	ILE	☐ Change ☐ Addition	
NAME			4. 2 N	AME	ļ	
STREET ADDRESS			4.3 S	REET ADDR	RESS	
CITY-ST-ZIP			4.4 C	TY-ST-ZIP		
TITLE		☐ DELETE	5.1 TI		☐ Change ☐ Addition	
NAME			5.2 N			
STREET ADDRESS				REET ADDR	RESS .	
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		☐ DELETE	6.1 TI	nle	Change Addition	
NAME			6.2 N	ME.		
STREET ADDRESS			6.3 S	REET ADDR	RESS	
CITY-ST-ZIP			6.4 CI	TY-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: