## 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 # P98000014131

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90023 046 \*\*\*150.00

SPEARS	AND SPEARS, INC.				
Principal Place	e of Business	Mailing Address			<b>    </b>
11335 STARKEY ROAD 11335 STARKEY ROAD					
LARGO FL 33773 LARGO FL 33773					
	•			DO NOT WRITE IN THIS SPACE	<del></del>
				3. Date Incorporated or Qualifed	Ì
				02/09/1998	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 21/01545 Applied For	<del></del> !
21		26		59-3491272   Not Applica	
,		Suite, Apt. #, etc.		5. Certificate of Status Desired  \$8.75 Additiona	۱
		27	<del>= 127 = 2 + 2</del>	Fee Required	
		City & State		6. Election Campaign Financing \$3.00 May Be	·
23[		28		Trust Fund Contribution Added to Fees	
Zip	Country		ountry	8. This corporation owes the current year Intangible Personal Property Tax.	
24	25	29 30		Personal Property Tax.  10. Name and Address of New Registered Agent	
<del></del>	9. Name and Address of Curre	nt Registered Agent	81 Name		一
LOV	ELACE,-WILLIAM K	``.			
	WEST BAY DR.	<b>₩</b> ± ;	82 Stree	eet Address (P.O. Box Number is Not Acceptable)	ļ
	GO FL 33770		83		_
			.   "		
			84 City	FL. 85 Zip Code	
		00 d COT 4500 Flands Statutes the			nd he
. office or r	egistered agent, or both, in the State	e of Florida. Such change was authoriz	ed by the corp	ned corporation submits this statement for the purpose of changing its registere orporation's board of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with, and accept the obligation	ations of, Section 607.0505, Florida St	atutes.		
SIGNATURE				ure required when reinstating) DATE	
42	Signature, typed or printed name of registered age	ND DIRECTORS 1:		ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<del></del> §
TITLE	D		TITLE	Pres. Change Add	
NAME	SPEARS, CHERLY	_	NAME	Cheryl Spoors	;
	11335 STARKEY ROAD	•	STREET ADDRESS	SS 11335 Starkey Rd.	1 5
STREET ADDRESS	LARGO FL 33773		CITY-ST-ZIP	lavan Cl sonna	}
CITY-ST-ZIP TITLE	D		TITLE	Vice 3 Add	dition (
	SPEARS, KURITS		NAME	VICE Pres.	
NAME	11335 STARKEY ROAD		STREET ADDRESS	Kurtis Spears -	ĺ
STREET ADDRESS	LARGO FL 33773	•		11335 Starkey Ko	
CITY-ST-ZIP	DANGO FL 33773		4 CITY-ST-ZIP	Largo, FZ 33 1/3	dition
			NAME		ļ.
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STREET ADDRESS	1	. 6.3		I	l.
CITY, CT. 7ID		2.4	CITY-ST-ZIP		- 1 -

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.