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 Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90004 029 ***150.00

DOCU 1. Corporation	MENT # P98000 In Name I, INC.	0016803						
Principal Place 840 6TH AVEN BRADENTON F	- · - ·	Mailing Address 840 6TH AVENUE WEST						
DRAUENTON	-L 34200	BRADENTON FL 34205				DO NOT WRITE IN T	HIS SPACE	
						3. Date Incorporated or Qualifed		
Principal Place of Business 2a. Mailing Address						02/19/1998 4. FEI Number		
21		<u>⊢</u> ¬ ~	26			65-0811929	<u> </u>	plied For ot Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	
22		27	<u> </u>			5. Certifcate of Status Desired	Fee Re	
City & Sta	te	City & State	⊢ ′			6. Election Campaign Financing	\$5.00	
Zip				ntry		Trust Fund Contribution	Added	o Fees
24	25	29	30			 This corporation owes the current year Personal Property Tax. 	Intangible Yes	□No
	9. Name and Address of Curre		190			10. Name and Address of New Register		
MORGAN, DALE G 840 6TH AVENUE WEST				81	Name Street Add	ress (P.O. Box Number is Not Acceptable)		,
Bradenton FL 34205				83				
	•		ŀ	84	City		. 85 Zip (- Codo
	-				•	poration submits this statement for the purpose	L	
SIGNATURE	Signature, typed or printed name of registered age	ations of, Section 607,0505, Fi	E: Registered	ites.		on's board of directors. I hereby accept the ap		
TITLE	D OF TOLKS AF	DELETE	13.) F		ADDITIONS/CHANGES TO OFFICERS	Change	AS IN 12
NAME	MORGAN, DALE G		1.2 NA			•		
STREET ADDRESS	3009 6TH AVENUE WEST		1.3 STF	REET A	DDRESS		·	
CITY-ST-ZIP	PALMETTO FL 34221		1.4 CIT	Y-ST-	ŻΙΡ			
TITLE	D	☐ DELETE	2.1 TITI	LE			☐ Change	☐ Addition
NAME	MORGAN, LINDA D		2.2 NA/	ΜE				
STREET ADDRESS	3009 6TH AVENUE WEST		2.3 STF	REET A	DDRESS			i
CITY-ST-ZIP	PALMETTO FL 34221	□ pc: stc	2. 4 CIT		ZIP			
TITLE NAME		☐ DELETE	3.1 TITL				Change	☐ Addition
STREET ADDRESS	, • I		3.2 NA					
CITY-ST-ZIP					DDRESS			ļ
TITLE		☐ DELETE	3.4. CIT 4.1 TITL		ZIP		☐ Change	Addition
NAME		_ _ ··· _	4. 2 NA					
STREET ADDRESS			. I		DDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-2	ZIP			
TITLE		☐ DELETE	5.1 TITL			· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
NAME			5.2 NAN		1			
STREET ADDRESS					DDRESS			
CITY-ST-ZIP		□ nciere	5.4 CITY 6.1 TITL		ZIP	A third becomes		
NAME		☐ D€LETE	6.2 NAM				☐ Change	☐ Addition
STREET ADDRESS			4		DDRESS			
CITY-ST-ZIP			6.4 CITY					1
			■ 0.7 OH 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.

SIGNATURE: