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

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90146 037 ***158.75

DOCUMENT #

1. Corporation Name

SILVER	WING PROPERTIES, INC.						
Deliver of Disco	a of Ducinosa	Mailing Address					
Principal Place							
2731 NW 41 STREET 2731 NW 41 STREET STE B-3 STE B-3							
GAINESVILLE FL 32606 GAINESVILLE FL 32606					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed 02/27/1998		
2. Principal Place of Business 2a. Mailing Address			15th St.		4. FEI Number 59, 252 7099		plied For
21 10	NW 2 3	20 /- / / / /	<u> </u>		31-330 1011	\$8.75 A	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	Fee Re	
City & Stat	INESVILLE PL	City & State	LE. FL	, ·	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip 2/	07 - TICA:	2007 -	Country	, <i>f</i>	8. This corporation owes the current year		
24 5 24	20 / 25 V 2/F -	- 29 DAUU / 30	OL "USA"		Personal Property Tax.	☐ Yes	₽ ₩6
	9. Name and Address of Current	Registered Agent	81 Name '	\	10. Name and Address of New Register	a Agent	
JOH	NSON, CARL L) <i>ohi</i>	NSON, CARL L.		
2731		82 Street	Addres	s (PIO. Box Number is Not Acaeptable)	E		
STE		83	<u> </u>	12	<u></u>		
GAIN		<u>>U</u>	15 1-2				
			84 City	- (LA)	ESINUE F	:L 85 425°	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	, the above-named	corpora	ation submits this statement for the purpose	of changing its	registered
office or r	registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was auth	norized by the corpo	oration'	s board of directors. I hereby accept the ap	pointment as reg	gistered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				equired w	ADDITIONS/CHANGES TO OFFICERS	AND DIDECTO	DS IN 12
12.	OFFICERS AN	D DIRECTORS DELETE	13.	Ι	AUDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	D CADI I	A DELL'IL	1.2 NAME	.		(L)	
NAME	JOHNSON, CARL L 2731 NW 41 ST, STE B-3		1.3 STREET ADDRESS				
STREET ADDRESS	GAINESVILLE FL 32606		1.4 CITY-ST-ZIP	<u> </u>			
CITY-ST-ZIP TITLE	GAINESVILLE PL 32000	☐ DELETE	2.1 TITLE	Fb,	ESLOPINT I SITID	☐ Change	Addition
NAME	1 5 1 m m m 2 5 5 0 0		2.2 NAME	Pil	GH MERRILL L'		/'
STREET ADDRESS		•	2.3 STREET ADDRESS	1/0	ESIDENT 15,T.D GH, MERRILL L' DI-1 NW 75th Street	7	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		ANESVILLE, FL. 32607		
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP	į			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	•		☐ Change	☐ Addition
NAME			5.2 NAME				

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SAN LUGEREQUIRE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 185 REQUIRED

☐ DELETE

Change

☐ Addition