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 # **P98000019629**1. Corporation Name

GMNE OSBORNE, INC.

May 03, 1999 8:00 am Secretary of State

05-03-1999 90010 018 ***158.75



								<u> </u>
Principal Place	e of Business	Mailing Address					BIBI HQIQ 18118 BILL	1 11910 1017 1007
2910 BAY TO BAY BLVD. 2910 BAY TO BAY BLVD.								
SUITE 203		SUITE 203				DO NOT WRITE IN THIS SPACE		
TAMPA FL 3362	29-8113	TAMPA FL 33629-8113	AMPA FL 33025-0113			3. Date Incorporated or Qualifed		
						03/02/1998		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number_	A	pplied For
21		26				59-3495272	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	8	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		Zip Country				8 This compration owes the current year Intangible		
24	25	ー · · · · · · · · · · · · · · · · · · ·		•		Personal Property Tax.	Yes	XIIIo
27	9. Name and Address of Curren		1001			10. Name and Address of New Register	ed Agent	7-4
_		,		81	Name			
	HINGTON, LYNN C		82		Street Addre	ess (P.O. Box Number is Not Acceptable)	· .	
701 BRICKELL AVENUE								
MIAN	/II FL 33131			83		•		
	·•			84	City	· •	85 Zip	Code
				لــــا			<u>- L</u>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
	Signature, typed or printed name of registered agen OFFICERS AN	4.00	: Registered	Agen	t signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
12.	D .	DELETE DELETE	1.1 1	TLE	· · · · · ·	Applitororu areze ye er regine	☐ Change	Addition
NAME	SIBLEY, RUSSELL A JR.		1.2 N			•		
STREET ADDRESS	2910 BAY TO BAY BLVD.		1.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL 33629-8113		1.4 C	ITY-ST	r-ZIP			
TITLE	0	☐ DELETE 2.1 T		TLE			☐ Change	☐ Addition {
NAME	JONES, ANTHONY		2.2 N	AME				
STREET ADDRESS	2910 BAY TO BAY BLVD.		2.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL 33629-8113		2.40	ITY-S	T-ZIP			
TITLE	D	☐ DELETE	3.1 ∏	TLE.		· ·	☐ Change	☐ Addition
NAME	SMITH, JAMES K		3.2 N		-			1
STREET ADDRESS	2910 BAY TO BAY BLVD.				ADDRESS	•		
CITY-ST-ZIP	TAMPA FL 33629-8113	☐ DELETE	3.4. C	ITY-S	T-ZIP		Change	Addition
TITLE .			4.11					
NAME	,				ADDRESS			}
STREET ADDRESS	·			TY-SI		•		
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	5.1 3				☐ Change	☐ Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET	ADDRESS			
CITY-ST-ZIP				ITY-S1	r-ZIP			
TITLE		☐ DELETE	6.1 T				Change	☐ Addition
NAME			6.2 N					
STREET ADDRESS			6.3 S	TREET	ADDRESS			

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 comporation 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 charges or 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 comporation 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 charges or the composition of the composition of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE

APRIL 29, 99