

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P98000021036**

1. Corporation Name

**MILDRED P. CHAPMAN, P.A.**

Principal Place of Business

**408 BEACH DR.  
DESTIN FL 32541**

Mailing Address

**408 BEACH DR.  
DESTIN FL 32541**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/05/1998**

4. FEI Number

**59-3499467**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 **36008 Emerald Coast Pkwy**  
Suite, Apt. #, etc.

22 **Suite 201**

23 **Destin, FL**

24 **32541**

Country

2a. Mailing Address

26 **36008 Emerald Coast Pkwy**  
Suite, Apt. #, etc.

27 **Suite 201**

28 **Destin, FL**

29 **32541**

Country

9. Name and Address of Current Registered Agent

**MCGILL, ROBERT E III**

**740 HIGHWAY 90 EAST  
STE 301  
DESTIN FL 32541**

10. Name and Address of New Registered Agent

81 Name **MCGILL, ROBERT E III (New Address)**

82 Street Address (P.O. Box Number is Not Acceptable)  
**36008 Emerald Coast Pkwy**

83 **Suite 301**

84 City **Destin**

FL

85 Zip Code **32541**

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 607.0605, Florida Statutes.

SIGNATURE **Robert E. McGill**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **6/29/99**

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **CHAPMAN, MILDRED P**  
STREET ADDRESS **408 BEACH DR.**  
CITY-ST-ZIP **DESTIN FL 32541**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET 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 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.

SIGNATURE: **Mildred P. Chapman**  
Signature, typed or printed name of officer, director, receiver or trustee

**6/29/99 (850) 837-5523**

CR2E034 (5/99)

U113574

**FILED**  
**Jul 13, 1999 8:00 am**  
**Secretary of State**

07-13-1999 90001 047 \*\*\*150.00



Robert E. McGill, III  
Attorney  
Admitted in Florida and Louisiana

David A. Owen  
Paralegal

586769-90001-47  
798000021036  
*Law Offices of*  
**Robert E. McGill, III, P.A.**

Closing Administrators

Karen S. Graybill  
and  
Sharon K. Deville

VIA CERTIFIED MAIL

July 6, 1999

Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Mildred P. Chapman, P.A.;  
1999 Annual Report

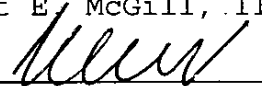
Dear Sir or Madam:

This firm represents Mildred P. Chapman, P.A., which referred to us the corporation's 1999 corporation annual report marked "second notice". We have completed the annual report on behalf of the corporation, and Mildred P. Chapman, Director of the corporation has executed the annual report as director.

Please note that the corporation did not receive the first notice of the corporation annual report, and therefore we hereby request on behalf of our client, waiver of the penalty filing fee of \$550.00. As you will note on the enclosed annual report, Ms. Chapman changed her place of business and mailing address, and apparently the first notice of the corporate annual report was not forwarded to her new address. Accordingly, enclosed is the corporation's filing fee in the amount of \$150.00.

Thank you for your consideration in this matter.

Very truly yours,  
Robert E. McGill, III, P.A.

  
By: David A. Owen, C.P.A.

as

Enclosure

cc: Pat Chapman