

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
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90109 041 ***150.00

DOCUMENT # P98000029936

1. Corporation Name

JENNIFER A. HALL, PH.D., P.A.

Principal Place of Business

**729 83RD AVENUE NORTH #203
ST. PETERSBURG FL 33702**

Mailing Address

**729 83RD AVENUE NORTH #203
ST. PETERSBURG FL 33702**

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip

24
Country

2a. Mailing Address

26
Management Development Institute
Eckerd College

Suite, Apt. #, etc.

27
4200 54th Ave. South

City & State

28
St. Petersburg, FL

Zip

29
33711-4700

Country

30
USA

File

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1998

4. FEI Number

59-3503583

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required.

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**TILLEM, SCOTT E
10 FAIRWAY DRIVE
SUITE 219
DEERFIELD BEACH FL 33441**

10. Name and Address of New Registered Agent

81 Name **Jennifer Hall**

82 Street Address (P.O. Box Number is Not Acceptable)
729 83rd Ave N. #203

83

84 City **St. Petersburg**

FL

85 Zip Code
33702

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

Jennifer Hall (Jennifer Hall)

2/10/99

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1 TITLE **PTSD** ☐ DELETE
NAME **HALL, JENNIFER A**
STREET ADDRESS **729 83RD AVENUE NORTH #203**
CITY-ST-ZIP **ST. PETERSBURG FL 33702**

2 TITLE **VP** ☐ DELETE
NAME **HALL, JENNIFER A**
STREET ADDRESS **729 83RD AVENUE NORTH #203**
CITY-ST-ZIP **ST. PETERSBURG FL 33702**

3 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6 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, with all other like empowered.

SIGNATURE:

Jennifer Hall (Jennifer Hall)

2/10/99

(727) 864-7972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)