**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000034854

1. Corporation Name

FLORIDA BAIL, INC.

## **FILED** Jul 21, 1999 8:00 am Secretary of State

07-21-1999 90005 024 \*\*\*550.00

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Principal Place of Business	Mailing Address	I 18411801 218 ININI 18111 ABIN ABIN ABIN ABIN ABIN ABIN BING 1811 BING BINN BINN BINN BINN BINN BINN BINN				
3819 IROQUOIS DRIVÉ SARASOTA FL 34234	3819 IROQUOIS DRIVE SARASOTA FL 34234	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  04/15/1998				
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For			
$_{21}$ 3819 Iroquois Drive	26 P.O. Box 4124	65-0826012	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<b>8.75</b> Additional Fee Required			
City & State 23 Sarasota, FL	City & State 28 Sarasota, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country 24 34234-0000 25 USA	Zip Country 29 3 4 2 3 0 - 4 1 2 4 30 USA	8. This corporation owes the current year Intangi Personal Property Tax.	ble Yes □No			
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent				
VOIGT, STEPHEN F 2414 BEE RIDGE ROAD SARASOTA FL 34239	1 1	dress (P.O. Box Number is Not Acceptable) 1819 Iroquois Drive				

Zin Code 34234 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 re agent. I a	egistered agent, or both, in the State of Florida. Such change was auth m familiar with, and accept the obligations of Section 601, 0605. Florida	orized by the corpo a Statutes( )	ration's board of directors. I here	by accept th	ne appoin	tment as reg	istered
_	Leigh A. Burch July 1500	Oh \$100	idono	June	15,	1999	
	Signature, typed or printed name of registered agent and title if epplicable. (NOTE: Re	gistered Agent signature re			DATE		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES	S TO OFFIC	ERS ANI		
TITLE	President DELETE	1,1 TITLE				Change	Addition
NAME	}	1.2 NAME					l
STREET ADDRESS	Leigh A. Burch	1,3 STREET ADDRESS					
CITY-ST-ZIP	3819 Iroquois Drive, Sarasota	1.4 CITY-ST-ZIP					
TITLE	Vice President 34234EQ000	2.1 TITLE				☐ Change	Addition
NAME	Paul E. Burch	2.2 NAME					
STREET ADDRESS	!	2.3 STREET ADDRESS					
CITY-ST-ZIP +	34234-0000	2.4 CITY-ST-ZIP					
TITLE	☐ DELETE	31 TITLE				Change	☐ Addition
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
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					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	☐ DELÉTE	6.1 TITLE				Change	☐ Addition
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY OF 7IP		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 of 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 of 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 changes or of an attachment with an address, with all other like empowered.

SIGNATURE:

June 15, 1999