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 # P98000039949

1. Corporation Name

JERRY BRUNNER, INC.

Princ	cipa	al Pla	ce o	f Busi	ness
2501	S.	BUM	BY A	VE.	
ODL A	NIT.	VO 61	220	ne	

Mailing Address

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90027 019 ***150.00



2501 S. BUMBY AVE. ORLANDO FL 32806		2501 S. BUMBY AVE. ORLANDO FL 32806			DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualifed 05/04/1998		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number 59 – 3508296		optied For
21		26			59-3308290		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					Additional equired
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	•	May Be to Fees
Zip 24	Country 25	Zip 29	Countr 30	У	This corporation owes the current year Personal Property Tax.	Intangible Yes	□3 \$No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registere	d Agent	
000	01110 5411151 1		8	1 Name			
2501	gins, daniel j s. Bumby ave.		8:	2 Street	Address (P.O. Box Number is Not Acceptable)		
ORL	ANDO FL 32806		8	3			
			8-	4 City	F	85 Zip	Code
office or re agent. I as	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli-	te of Florida. Such change was au gations of, Section 607.0505, Flori	itnorized b ida Statute	y the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the appropriate the statement of the purpose equired when reinstating)	ointment as re	gistered
12.		AND DIRECTORS	13.	an agnatura n	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	DPT	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	BRUNNER XIEROME D		1.2 NAME	<u>:</u>	PDTS		
STREET ADDRESS	2801×6×BUMBY AVE.		1.3 STRE	ET ADDRESS	Brunner, Jerome D		
CITY-ST-ZIP	XORKANDO FEX32806		1.4 C/TY-	ST-ZIP	2501 S Bumby Ave.		
TITLE	S	DELETE	2.1 TITLE		Orlando, FL 32806	☐ Change	☐ Addition
NAME	GOOGINS, HENATE B		2.2 NAME				
STREET ADDRESS	2804>SXBUMBY AVE.		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	GREANDE FEX32806 X		2.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	-		Change	☐ Addition
NAME			3.2 NAME				}
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		- Delete	3.4. CITY			☐ Change	Addition
TITLE		☐ DELETE	4.1 TITLE 4. 2 NAM			5.14.190	
NAME			1	ET ADDRESS			
STREET ADDRESS			4.3 STRE				{
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME		_	5.2 NAME				ļ
STREET ADDRESS			5.3 STRE	ET ADDRESS			1
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME.			6.2 NAME	Ξ			}
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-7IP			6.4 CITY	ST-ZIP			

14. I hereby certify that the information supplied with this filling 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 supplementary 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 changed, or on the factor of the corporation of the receiver of trustee empowered.

SIGNATURE:

Daytime Phone #