**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000043481 1. Corporation Name

JIM KIRKLAND REAL ESTATE, INC.

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90011 034 \*\*\*150.00



Principal Place of Business	Mailing Address			I (MAI(MMI )) and a min maint	1111 2:500 4111 41001		
1618 WILLOW OAK DR.	1618 WILL OW COK DP-						
EDGEWATER FL 32132	ATER FL 32132 EDGEWATER FL 32132			DO NOT WRITE IN T	DO NOT WRITE IN THIS SPACE		
				3. Date incorporated or Qualifed	IIO OF ACE		
				05/05/1998	<del></del>		
2. Principal Place of Business	2a. Mailing Address	1 0		4. FEI Number	<del> </del>	plied For	
21 2903 Royal Palm Drive		Im Dr	rive	59-3508760		t Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	_		5. Certifcate of Status Desired	\$8.75 A	I .	
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be	
23 Edgewater, FL 32141	28 Edgewater, FL	3214	.1	Trust Fund Contribution	Added to	Fees	
Zip Country	Zip Country		8. This corporation owes the current year Intangible				
24 32141 25	1-01 0-1-1	0		Personal Property Tax.		□No	
9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent		
INDICEASED TANGE IT ID		8		and, James H. Jr.			
KIRKLAND, JAMES H JR		8:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)			
l .	1618 WILLOW OAK DR.			903 Royal Palm Drive			
EDGEWATER FL 32132		8:	3		577.19	a:	
		8-	City		85 . Zin (	ode:	
			Fdaew		<b>L</b> 321	41	
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the abo			e of changing its	registered	
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am amiliar with, and accept the obliga	of Florida. Such change was autitional of, Section 607/0505, Florid	nonzed b ja Statute	y tne corpora s.	ition's board of directors. Thereby accept the ap	pountment as re	Jistorou	
	// <i>\L</i>			1-26-	99	-	
		Registered Ag	ent signature requ	ared when reinstating)		_	
12. OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	☐ DELETE	1.1 TITLE		DPVS	☐ Change	X Addition	
NAME		1.2 NAME		irkland.James HJr.			
STREET ADDRESS		1.3 STRE	ET ADDRESS 2	903 Royal Palm Drive			
CITY-ST-ZIP		1.4 CITY-	ST-ZIP Ė	dgewater, FL 32141	<del></del>		
TITLE	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME		2.2 NAME					
STREET ADDRESS		2.3 STRE	ET ADDRESS			ļ	
CITY-ST-ZIP		2. 4 CITY	ST-ZIP		-		
TITLE	☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME		3.2 NAME					
STREET ADDRESS		3.3 STRE	ET ADDRESS				
CITY-ST-ZIP		3.4, CITY	ST-ZIP		<u> </u>		
TITLE	☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME		4. 2 NAM	:				
STREET ADDRESS		4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			. 1				
TITLE		4.4 CITY-	ST-ZIP				
1	☐ OELETE	4.4 CITY-			Change	☐ Addition	
NAME	☐ OELETE	_		77 AN OF THE STREET	Change	Addition	
NAME STREET ADDRESS	☐ OELETE	15.1 TITLE 5.2 NAME		, o o o o o o o o o o o o o o o o o o o	☐ Change	☐ Addition	
	☐ OELETE	15.1 TITLE 5.2 NAME	ET ADDRESS				
STREET ADDRESS	☐ OELETE	15.1 TITLE 5.2 NAME 5.3 STRE	ET ADORESS ST-ZIP		☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ET ADDRESS ST-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE		5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY- 6.1 TITLE 6.2 NAME	ET ADDRESS 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 epoch 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 exprovered.