## 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 # P98000051381

1. Corporation Name

ADIRONDACK ASSOCIATES, INC.

## Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90075 050 \*\*\*150.00



Principal Place	e of Business	Mailing Address					11000 11101	(910) 1101 (68)	
922 SOUTH FEDERAL HIGHWAY DANIA FL 33004		922 SOUTH FEDERAL HIGHWAY DANIA FL 33004			DO NOT V	/RITE IN THIS SP	PACE		
					3. Date Incorporated or Qualif				1
					06/09/1998				
2. Principal Pl	face of Business	2a. Mailing Address			4. FEI Number		Ар	plied For	
21		26 77 EAST	LONG	LAKET	CAD 65-0844	620	No	t Applicable	]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75 <i>p</i>		
22		27			5. 001.1102.10 0, 01.1100 200.10		Fee Re	<del></del>	
City & State	e 	City & State 28 CLOOM FIEL		-s MI	Election Campaign Financi     Trust Fund Contribution	ng 🗆 🗀	\$5.00 Added t		
Zip	Country	Zip	Cou	ntry _	8. This corporation owes the o	· -	-		
24	25	29 48304	30	<del></del>	Personal Property Tax.			□No	ł
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of Ne	w Registered Ag	ent		1
DAVI	IS, ROBERT S		İ	81 Name					
	SOUTH FEDERAL HIGHWAY			82 Street A	ddress (P.O. Box Number is Not Acce	eptable)			]
	IA FL 33004			83	, , , , , , , , , , , , , , , , , , ,		<del></del>		-
2,44	71 L 0000 I								}
				84 City			85 Zip (	Code	1
44 👨	to the provisions of Sections 607.0502	and 607 1500 Florida Stat	utos the e	nove parred se	ernoration submite this statement for	the numose of cha	anging its	registered	-
office or re	egistered agent, or both, in the State of	f Florida. Such change was	authorized	by the corpor	ation's board of directors. I hereby ac	cept the appointm	ient as re	gistered	ſ
agent. I ai	m familiar with, and accept the obligation	ons of, Section 607.0505, F	londa Stati	ites.					
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NO	TE: Registered	Agent signature reg	uired when reinstating)	DATE			١.
12.	OFFICERS AND		13.	7 gont agriculture	ADDITIONS/CHANGES TO		DIRECTO	RS IN 12	8
TITLE	PT	☐ DELETE	1.1 717	LE .			Change	☐ Addition	1
NAME	DAVIS, ROBERT S		1.2 NA	ME					;
STREET ADDRESS	922 SOUTH FEDERAL HIGHWAY	1	1.3 ST	REET ADDRESS		•			ì
CITY-ST-ZIP	DANIA FL 33004		1.4 CF	ry-st-zip					] 8
TITLE	VS	☐ DELETE	2.1 TF	LE			Change	☐ Addition	1
NAME	Bellinson, James L		2.2 NA	WE					
STREET ADDRESS	242 ASPEN	ಎಂ ಪ್ರವಾಧ ಕತ್ತ	2.3 ST	REET ADDRESS					Ì
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NAME			3.2 NA						
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STREET ADDRESS			0.3 5	VICE I MIDNESS					1

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 ennual 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 attentionent with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR