PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCÚMENT # P98000052042

MONROE A. COOGLER, P.A.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90023 019 ***150.00



							31 8 111 0 (181)	BBAN BABU 1181 1781	
Principal Place	e of Business	Mailing Address							
320 HIGHWAY 41 SOUTH 320 HIGHWAY 41 SOUTH									
INVERNESS FL 34450 INVERNESS FL 34450						DO NOT WRITE IN THIS SPACE			
!						3. Date Incorporated or Qualified			7
						06/10/1998			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	7
21	}	26				267-58-6056		Not Applicable	•
Suite, Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional	1
22		27				3. Certificate of Status Desired		e Required	
City & State	e - · · · · · · ·	City & State	T	-	٠	6. Election Campaign Financing		00 May Be	- (
23		28				Trust Fund Contribution		led to Fees	4
_Zìp	Country	Zip	Cou	intry		8. This corporation owes the current year	intangible		_
24		29	30			Personal Property Tax. 10. Name and Address of New Registers			\dashv
ļ	9. Name and Address of Current R	egistered Agent		81 6	Vame	TO. Marine Brid Address of New Registers	o Agoin		٦.
COO	IGLER, MONROE A								4
	HIGHWAY 41 SOUTH			82 5	Street Addre	ss (P.O. Box Number is Not Acceptable)			1
	RNESS FL 34450			83		<u>-</u>			1
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				84 (City	F	L 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502 a	nd 607,1508. Florida St	atutes, the a	bove-n	amed corpo	ration submits this statement for the purpose	of changin	g its registered	7
office or re	egistered agent, or both, in the State of F	Florida, Such change was of Section 607 0505	s authorized Florida Stati	d by the utes.	o corporation	nation submits this statement for the purposer i's board of directors. I hereby accept the app	ointment a	is registered	- [
1	m tamiliar with, and accept the congetion	15 (1, 560,001) (01.0505)	T POTION CON-	J. J. J.					l
SIGNATURE	Signature, typed or presed name of registered agent an	d little if applicable. (N	OTE: Registered	Agent sig	gnature required				_ @
12.	OFFICERS AND I		13.			ADDITIONS/CHANGES TO OFFICERS			<u> </u>
MUE	President	DELETE				President	Cha	nga 🗋 Additik	S R2E034 (11/98)
NAME	Monroe A. Coogler		1.2 N			Monroe A. Coogler			1 8
STREET ADDRESS		-h	1	TREET AD	ORESS 3	320 Highway 41 South Inverness, FL 34450			[]
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l i	Secretary/Treasurer		I			Secretary/Treasurer	☐ Chai	nge Additio	"
NAME	Secretary/Treasurer Monroe A. Coogler		22 N	AME	M	Secretary/Treasurer Monroe A. Coogler	Cha	nge 🗍 Additio	"
STREET ADDRESS	Monroe A. Coogler	. Deterie	22 N 23 ST	AME TREET AD	M	Secretary/Treasurer Monroe A. Coogler	☐ Chai	nge 🗀 Additio	~~ }
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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

NOMETURE AND TYPED OF PRINTED MANE OF SIGNING OFFICER OR DIRECTO

MATA 5 1999 352-726 6767