FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90132 037 ***150.00

	PPO HOLDINGS, INC			·-							
Principal Place of Business 8186 BAYMEADOWS WAY WEST IACKSONVILLE FL 32256			Mailing Address 8186 BAYMEADOWS WAY WEST JACKSONVILLE FL 32256								
							D	O NOT WR	ITE IN THI	S SPACE	
						7	ate Incorporated 6/30/1998	l or Qualifed			
¬	Place of Business	L	2a. Mailing Address		V PDF		El Number 9-352	1437	7	 	Applied For lot Applicable
1 ///25 Suite, Apt.	<u> </u>		Suite, Apt. #, etc		<u> </u>	-	ertifcate of Statu			\$8.75	Additional Required
2∫ _ City & Stat	, (1	1 27	City & State		<u> </u>	6. E	lection Campaigr	n Financing		\$5.0	May Be
3 beck	(Sonville +	L . 21	B Jacksonvi		-L-		rust Fund Contrit				to Fees
Zip 322	56 25 US	5A 29	32256	30 L)sa_		his corporation o ersonal Property		rent year Ir	ntangible Yes	□No
	9. Name and Address	of Current Reg	jistered Agent			10. N	ame and Addre	ss of New I	Registered	Agent	
BRANT, MOORE, MACDONALD & WELLS, P.A. 50 NORTH LAURA STREET SUITE 3100 JACKSONVILLE FL 32202					82 Street A	ddress (P.C	ess (P.O. Box Number is Not Acceptable)				
0.101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				84 City		·····		FI	85 Zip	Code
11. Pursuant	to the provisions of Sections egistered agent, or both, in the	607.0502 and	1 607,1508, Florida S	tatutes, the a	bove-named c	orporation s	ubmits this state	ment for the	purpose o	f changing i	ts registered registered
office or r	rn familiar with, and accept t	the State of Fig the obligations	orida. Such change w of, Section 607.0505	as authorized	by the corpor	ration's boar	d of directors. I f	lereby acce	pt the appe		_
office or r agent. I a	m familiar with, and accept t	the obligations	of, Section 607.0505	/as authorized i, Florida Stat	by the corpor	ration's boar	a or airectors. I r	lereby acce	DATE		
office or r agent. I a IGNATURE	rn familiar with, and accept t Signature, typed or printed name of re	the obligations	of, Section 607.0505	/as authorized i, Florida Stat	i by the corpor utes.	ration's boar	a or airectors. I r		DATE	ND DIRECT	ORS IN 12
office or r agent. I a SIGNATURE	rn familiar with, and accept to Signature, typed or printed name of re OFFIG	the obligations	of, Section 607.0505	/as authorized , Florida Stati (NOTE: Registered	I by the corporutes. Agent signature rec	ration's boar	d of directors. I r		DATE		ORS IN 12
office or r agent. I a SIGNATURE 2.	rn familiar with, and accept the Signature, typed or printed name of respective D SANFILIPPO, JUDY	the obligations	of, Section 607.0505 the if applicable.	NOTE: Registered 13. E 1.1 TI	Agent signature rec	ration's boar	d of directors. I r	GES TO OF	DATE FICERS A	ND DIRECT	ORS IN 12
office or r agent. 1 a SIGNATURE 2. TLE	Signature, typed or printed name of re OFFIG D SANFILIPPO, JUDY 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF	of, Section 607.0505 the if applicable.	(NOTE: Registered 13. E 1.1 TI 1.2 NV	Agent signature rec	ration's boar	d of directors. I r	GES TO OF	DATE FICERS A	ND DIRECT	ORS IN 12
office or r agent. I a SIGNATURE 2. TILE AME TREET ADDRESS ITY-ST-ZIP	Signature, typed or printed name of re OFFIG D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322	gistered agent and til CERS AND DIF	of, Section 607.0505 the if applicable. RECTORS DELET	NOTE: Registered 13. E 1.1 Tr 1.2 N/ 1.3 Sl 1.4 Cl	Agent signature rec TLE ME REET ADDRESS TY-ST-ZIP	ration's boar	d of directors. I r	GES TO OF	DATE FICERS A	ND DIRECT	ORS IN 12 ☐ Addition
office or ragent. I a gent. I a gent	Signature, typed or printed name of re OFFIG D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable.	As authorized, Florida State NOTE: Registered 13. E 1.1 Tr 1.2 Nv 1.3 S1 1.4 Cr E 2.1 Tr	Agent signature rec T.E ME REET ADDRESS TY-ST-ZIP T.E	ration's boar	d of directors. I r	GES TO OF	DATE FICERS A	ND DIRECT	ORS IN 12 ☐ Addition
office or ragent. I a agent. I a agent. I a a gent. I a a gent. I a a gent. I a consideration of the consideration	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorzec , Florida State NOTE: Registered 13. E 1.1 Tr 1.2 N 1.3 S1 1.4 CI E 2.1 Tr 2.2 N	Agent signature rec T.E. MME REET ADDRESS TY-ST-ZIP T.E. MME	ration's boar	d of directors. If Blating) DITIONS/CHAN CHESTE ON VIII e	GES TO OF	DATE FICERS A	ND DIRECT Exchange	ORS IN 12 ☐ Addition
office or ragent. I a agent. I a agent. I a agent. I a agent. I a agent	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered) 13. E 1.1 TT 12 NV 1.3 S1 1.4 CI E 2.1 TT 2.2 NV 2.3 S1	Agent signature rec LE ME REET ADDRESS TY- ST- ZIP LE ME REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	DATE FICERS A	ND DIRECT Property of the Change	ORS IN 12 ☐ Addition
office or ragent. I a agent. I a agent. I a agent. I a agent. I a agent	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorzec, Florida State NOTE: Registered 13. E 1.1 Tr 1.2 N 1.3 S1 1.4 Cl E 2.1 Tr 2.2 N 2.3 S1 2.4 C	Agent signature rec T.E. MME REET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP	ration's boar	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Property of the Change	ORS IN 12 Addition
office or ragent. I a agent. I a agent. I a a gent. I a a gent. I a a gent. I a agent. I	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered) 13. E 1.1 TT 12.NV 1.3 S1 1.4 CI E 2.1 TT 22.NV 2.3 S1 2.4 C	Agent signature rec LE ME REET ADDRESS TY- ST- ZIP REET ADDRESS TY- ST- ZIP REET ADDRESS TY- ST- ZIP REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Property of the control of	ORS IN 12 Addition
office or ragent. I a agent. I a agent address ity-st-zip tile ame itreet address ity-st-zip tile ame itreet address ity-st-zip tile ame	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec LE ME REET ADDRESS TY- ST- ZIP REET ADDRESS TY- ST- ZIP REET ADDRESS TY- ST- ZIP REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Property of the control of	ORS IN 12 Addition
office or ragent. I a agent. I a agent. I a capture. 2. The ame irrest address ty-st-zip the ame irrest address ty-st-zip the ame irrest address ty-st-zip the ame irrest address treet address irrest address.	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec LE ME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I a agent. I a siGNATURE 2. TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered	Agent signature recurrence compositions. Agent signature recurrence compositions continued to the composition of the composition continued to the composition co	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I a agent. I a capture. 2. The ame The a	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered	Agent signature recurrence in the corporates. Agent signature recurrence in the corporate	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a ragent.	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered	Agent signature recurrence in the corporates. Agent signature recurrence in the corporate	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I agent address in a agent address in agent address i	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec LE ME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE REET ADDRESS TY-ST-ZIP	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. 1 a agent. 1 a agent. 1 a cagent. 2	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET	As authorized, Florida State (NOTE: Registered 13. E 1.1TT 12.NV 1.3 S1 1.4 C1 2.1 TT 2.2 NV 2.3 S1 2.4 C E 3.1 TT 3.2 NV 3.3 S1 3.4 C E 4.1 TT 4.2 N 4.3 S1 4.4 CI E 5.1 TT	Agent signature recurrence signature signature recurrence signature signature recurrence signature signature recurrence signature recur	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I agent	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec Agent signature rec LE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I agent address ty-st-zip the ame in agent address ty-st-zip the agent address ty-st-zip the agent address ty-st-zip the agent address ty-st-zip the agent	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec Agent signature rec LE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a agent. I agent agent address ty-st-zip agent agent address ty-st-zip agent address ty-st-zip agent address ty-st-zip agent agent address ty-st-zip agent agent address ty-st-zip agent agent address ty-st-zip agent	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec LE ME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or ragent. 1 a agent. 1 a ame treet address ity-st-zip tile ame	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered	Agent signature rec Agent signature rec LE MME REET ADDRESS TY-ST-ZIP LE MME	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or ragent. I a agent. I a agent. I a a signature 12. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME AME TREET ADDRESS ITY-ST-ZIP ITLE AME	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered 13.) E 1.1 TI 12.N 1.3 SI 1.4 CI 22.N 2.3 SI 2.4 C E 3.1 TI 32.N 3.3 SI 3.4 C E 4.1 TI 4.2 N 4.3 SI 4.4 CI 5.1 TI 52.N 5.3 SI 5.4 CI 6.1 TI 62.N E 6.1 TI 62.N	Agent signature recurrence signature s	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or r	Signature, typed or printed name of re OFFIC D SANFILIPPO, JUDY 8186 BAYMEADOWS V JACKSONVILLE FL 322 D SANFILIPPO, ANDREW 8186 BAYMEADOWS V	gistered agent and til CERS AND DIF VAY WEST 256	of, Section 607.0505 the if applicable. RECTORS DELET DELET	As authorized, Florida State (NOTE: Registered 13.) E 1.1 TT 12.N 1.3 S1 1.4 CI 2.2 NI 2.3 S1 2.4 C 3.1 TT 32.N 3.3 S1 3.4 C E 4.1 TT 4.2 N 4.3 S1 4.4 CI 5.1 TT 5.2 NI 5.3 S1 5.4 CI E 6.1 TT 62.NV 6.3 S1	Agent signature rec Agent signature rec LE MME REET ADDRESS TY-ST-ZIP LE MME	uired when reining AC	d of directors. In stating) DITIONS/CHAN	GES TO OF	PD E	ND DIRECT Change	ORS IN 12 Addition Addition Addition