


FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90007 016 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000062812 1. Corporation Name FLEECE & DEVINE, P.A.			
Principal Place of Business 14820 RUE DE BAYONNE #507 CLEARWATER FL 33762		Mailing Address 14820 RUE DE BAYONNE #507 CLEARWATER FL 33762	
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip Country 24.			
2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip Country 29.			
3. Date Incorporated or Qualified 07/14/1998			
4. FEI Number 59-3525686			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Election Campaign Financing, Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
8. This corporation owes the current year intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent FLEECE, WILLIAM H 14820 RUE DE BAYONNE #507 CLEARWATER FL 33762		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <u>William H. Fleece</u> DATE <u>2/9/99</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS TITLE President / Director <input type="checkbox"/> DELETE NAME William H. Fleece STREET ADDRESS 14820 Rue. de Bayonne # 506 CITY-ST-ZIP Clearwater FL 33762 TITLE V. Pres. / Director <input type="checkbox"/> DELETE NAME Marie C. Devine STREET ADDRESS 14820 Rue. de Bayonne # 506 CITY-ST-ZIP Clearwater FL 33762 TITLE Treasurer <input type="checkbox"/> DELETE NAME William H. Fleece STREET ADDRESS CITY-ST-ZIP TITLE Secretary <input type="checkbox"/> DELETE NAME Marie C. Devine STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-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)(b), 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 in the attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/99 727 572 0123
Date Daytime Phone #

CR2E034 (11/98)