

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

FILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90025 030 ***150.00

DOCUMENT # P98000067625

1. Corporation Name
CONNECTRIGHT, INC.

Principal Place of Business
210-117 BRADFORD ROAD
TALLAHASSEE FL 32303-4802

Mailing Address
210-117 BRADFORD ROAD
TALLAHASSEE FL 32303-4802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1998

4. FEI Number

59-3557819

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 4090 HODGES BLVD

Suite, Apt. #, etc.

22 Apt 1001

City & State

23 Jacksonville FL

Zip

24 32224

Country

25 Duval

2a. Mailing Address

26 4090 Hodges Blvd

Suite, Apt. #, etc.

27 Apt 1001

City & State

28 Jacksonville FL

Zip

29 32224

Country

30 Duval

9. Name and Address of Current Registered Agent

CORNISH, KENNETH R JR
210-117 BRADFORD ROAD
TALLAHASSEE FL 32303-4802

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4090 HODGES BLVD Apt 1001

83

84 City

JACKSONVILLE

FL

85 Zip Code

32224

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

Kenneth R. Cornish, Jr.

3/27/99

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME President KENNETH R. CORNISH, JR

STREET ADDRESS 4090 HODGES BLVD APT 1001

CITY-ST-ZIP JACKSONVILLE, FL 32224

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME President Kenneth R. Cornish, Jr

1.3 STREET ADDRESS 4090 HODGES BLVD APT 1001

1.4 CITY-ST-ZIP JACKSONVILLE, FL 32224

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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)(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:

Kenneth R. Cornish, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/99

Date

904-821-4027

Daytime Phone #

CR2E034 (11/98)

0563031