## 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 # P98000068082

**FUSSELL CORPORATION** 

Principal Place of Business

Mailing Address

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90010 020 \*\*\*150.00



2001 South Federal Highway Delray Beach fl 33483		2001 SOUTH FEDERAL HIGHWAY DELRAY BEACH FL 33483		DO NOT WRITE IN	THIS SPACE		
					3, Date Incorporated or Qualifed 08/04/1998		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21	·	26			65-0856143		lot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	_	-	5. Certificate of Status Desired	• •	Additional lequired.
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25	Zip 3	Countr 10	У	This corporation owes the current year     Personal Property Tax.	ar Intangible	XXIvo
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registe	ered Agent	
				1 Name			}
FUSSELL, GEORGE 2001 SOUTH FEDERAL HIGHWAY			8:	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
DELF	RAY BEACH FL 33483		8	3			i
			8-	4 City		FL 85 Zip	Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	e of Florida. Such change was aut	horized b	y the corpora	orporation submits this statement for the purpo- ation's board of directors. I hereby accept the a	se of changing it appointment as r	s registered registered
- SIGNATORE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	Registered Ag	ent signature requ	uired when reinstating) DA		
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	FUSSELL, GEORGE		1.2 NAME	. `			i
STREET ADDRESS	2001 SOUTH FEDERAL HIGHV	NAY	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL 33483		1,4 CITY-	ST-ZIP			
TITLE	<del></del>	☐ DELETE	2.1 TTLE			Change	Addition
NAME			2.2 NAME	:			
STREET ADDRESS			2.3 STRE	ET ADDRESS			}
CITY+ST-ZIP -	The same of the sa		2.4 CITY	-ST-ZiP			
TITLE		☐ DELETE	3,1 TITLE			Change	Addition
NAME			3.2 NAME	:			ì
STREET ADDRESS			3.3 STRE	ET ADDRESS			l.
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4,1 TITLE			Change	Addition
NAME			4, 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	·		
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME	:			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP		•	5.4 CITY-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME		//	6.2 NAME	: [			
STREET ADDRESS	$\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$		6.3 STRE	ET ADDRESS			
	// ///	/	6.4 CITY-	ST-ZIP			
CITY-ST-ZIP	estifut that the information thundled w	tal this filter do			n Section 119 07/3\(ii) Florida Statutes I furthe	or cortifu that the	information

wental 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 whental 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a natachment with an address, with all other like empowered. indicated on this annual report o officer or director of the corpora Block 12 or Block 13 if change

SIGNATURE:

561-278-7800