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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000071112

1. Corporation Name

ATLANTA HIGHWAY DEVELOPMENT CORPORATION

Principal Place	e of Business	Mailing Address				1910 1181 1081
2152 14TH CIRC		2152 14TH CIRCLE NORTH				
ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713						
				DO NOT WRITE IN TH	IIS SPACE	
				3. Date Incorporated or Qualifed 08/14/1998		
- D: ::-10	Land Ducine	Co Mailing Address		4. FEI Number		lied For
_	lace of Business	2a. Mailing Address			<u> </u>	Applicable
Suite, Apt.	# atc	Suite, Apt. #, etc.		59-3527541	\$8.75 A	
22	#, etc.	27		5_Certifcate of Status Desired	Fee Rec	
City & State	e	City & State		6. Election Campaign Financing	\$5.00	May Re
23	-	28		Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	29 3	o	Personal Property Tax.	Yes	X No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent	
1 114.15	20.10		81 Name	rk H. Scherer, III		
HINES, J B			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
9800 FOURTH STREET NORTH SUITE 403		215	2 14th Circle North			
51.1	PETERSBURG FL 33702		83		•	
			84 City		. 85 Zip C	ode
			St.	Petersburg F	' L 337	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	the above-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its i	registered iistered
onice or it	m familiar with, and accept the obligation	po of Costion 607 0505 Florid	to Statutos	bit a bodita of directors, i fictory docept and ap	po	
agent. i ai	ili lamillaryntu, alio accept the obligatio	705 O1, 30000011 007.0303, 110110	ia Sialules,			
SIGNATURE	STORTED			1.4	99	
SIGNATURE	Signature, typed or printed hame of registered agent a	and title if applicable. (NOTE: R	egistered Agent signature require		.99	DC IN 12
SIGNATURE	Signature, typed of printer name of registered agent a	and title if applicable. (NOTE: R	egistered Agent signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICERS		
SIGNATURE 12. TITLE	Signature, typed of printed farms of registered agent a OFFICERS AND	and title if applicable. (NOTE: R	egistered Agent signature require 13. 1.1 TITLE		AND DIRECTOR	RS IN 12
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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.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90096 013 ***150.00