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 # P98000072762 1. Corporation Name

ALAN L. GADDIE, P.A.

Principal Place of Business

Mailing Address

May 05, 1999 8:00 am Secretary of State

05-05-1999 90233 034 ***150.00



3218 PLEASANT LAKE DR TAMPA FL 33618		3218 PLEASANT LAKE DR TAMPA FL 33618				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 08/17/1998		
2. Principal Pl	ace of Business	2a. Mailing A	ddress			4. FEI Number	Applied For	
21		26				59-3527288	Not Applicable	
Suite, Apt. :	#, etc.	Suite, Ap	t. #, etc.			LE Cortificate of Status Desired	5 Additional Required	
City & State	•	City & St	tate				00 May Be	
23		28				Trust Fund Contribution Add	ed to Fees	
Zip	Country	Zip Count 30				8. This corporation owes the current year Intangible Personal Property Tax. ✓ Yes No		
24	9. Name and Address of Curre					10. Name and Address of New Registered Agent		
	3. Name and Address of Curre	iit itegistered Age		81	Name			
WATKINS, CARL T CPA				82	01 4	Address (D.O. Pau Number in Not Accontable)		
7345	JACKSON SPRINGS RD, #3				Street Add	ddress (P.O. Box Number is Not Acceptable)		
TAMI	PA FL 33634			83				
				84	City	E 85 2	Zip Code	
						FL 1	r its registered	
office or re	egistered agent or both in the State	of Florida Such c	hange was author	ized by	the corpora	rporation submits this statement for the purpose of changing tion's board of directors. I hereby accept the appointment a	s registered	
agent. I ai	m familiar with, and accept the obliga	ations of, Section 6	607.0505, Florida S	Statutes				
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	(NOTE: Regist	tered Agen	t signature requi	ired when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	CTORS IN 12	
TITLE			DELETE 1	1.1 TITLE	1	RESIDENT Char	nge	
NAME			1	1.2 NAME	1	ALAN L. GADSIE	ļ	
STREET ADDRESS				1.3 STREET	TADDDESS	- 16 UI FATAWT LITE WALL		
CITY-ST-ZIP			· '	OTTALL	ADDALSS	32/0 / 20/10/0		
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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.

SIGNATURE:

CR2E034 (11/98)