05-10-1999 90116 002 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000074123

1. Corporation Name

Principal Place of Business

SEHNERT, LUMBRA, ROBINSON AND ASSOCIATES, INC.

1231 KINDEL AV WINTER PARK F		<del>-1231 KINDEL AVE</del> . W <del>inter Park Fl 3278</del> 9									
	3	DO DOY 526459				DO NOT WRITE IN THIS SPACE					
1910 Alden Rd Orlando, FL 32803		PO Box 536458 Orlando, FL 32853-6458			_	3. Date Incorporated or Qualifed 09/01/1998					
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			A	pplied For	
21 1910	Alden Rd.	26 PO Box 5364	26 PO Box 536458			-353 <u>5</u> (	058		N	lot Applicable	
Suite, Apt.		Suite, Apt. #, etc.				5. Certifcate of Status Desired				\$8.75 Additional Fee Required	
City & State		City & State				tion Campa	ign Financing		\$5.00	May Be	
23Orland		28 Orlando EI	28 Orlando, EL			t Fund Con	-			to Fees	
Zip	Country	Zip Zip				corporation	owes the curre	ent year Inta	ngible		
24 32803 25		29 3 2 8 5 3 6 4 5 8 30	29 32853-6458 30			Personal Property Tax. Yes No					
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent								
					JAMES	ים דות	ADD A				
SEHI	<del>NERT, MARK</del> -W		82 Street Add			K LIUI	IDKA is Not Accenta	hle)			
1231	KINDEL AVE.		i I			dress (P.O. Box Number is Not Acceptable)					
WINTER PARK FL 32789			83	1.3.1.0	<del>MIGGII</del>	RG v					
									Tarl 7:-	Codo	
			84	City	Orlane	do.		FL	85 Zip	100e	
44 Dusquant	to the province of Sections 607.05	502 and 607 1508 Florida Statutes	the above	-named r	corporation sub	mite this sta	tement for the	purpose of c	hanging it	s registered	
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 ar	m familiar with, and accept the oblig	sations of, Section 607.0505, Florida	Statutes.								
SIGNATURE	Ignature, typed or printer name of registers as	WOTE Box	valued Ameri	econstine re	equired when reinstat	pg)		DATE		<u> </u>	
12.		AND DIRECTORS	13.	aignature re			ANGES TO OFF	ICERS AND	DIRECT	ORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE					• • • • • • • • • • • • • • • • • • • •	Change		
NAME	SEHNERT, MARK W	_	1.2 NAMÉ		Vice-						
STREET ADDRESS	1231-KINDEL AVE:		1.3 STREET	ADDRESS	1910 A	lden :	Rd				
	WINTER PARK FL 32789		1.4 CITY-ST		Orland	o, FL	32803				
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE	-211					Change	Addition	
	_	DECE!-C	2.2 NAME	1	Presi	dent	рa				
NAME	LUMBRA, JAMES R 1 <del>231-Kindel-Ave</del> .		2.3 STREET	ADODESS	1910	arden	Ku ,			ĺ	
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		2.4 CITY-67	1	Orland	o, FL	329803			į.	
CITY-ST-ZIP			3.1 TITLE	1-ZIP	C = ~ / T ==		~		Change	e 🔲 Addition	
TITLE	Robinson, Kenneth D		3.2 NAME	1	Sec/Tr					_	
NAME	1231-KINDEL AVE.		3.3 STREET	ADORECC	1910 A	lden	Rđ.			l	
STREET ADDRESS	_WINTER PARK FL 32789				Orlande	o, FL	32803				
CITY-ST-ZIP	WHATEN FAIN IL 32709	☐ DELETE	3.4. CITY-ST 4.1 TITLE	1-212					Change	Addition	
TITLE		☐ BELETE		1						_	
NAME			4.2 NAME								
STREET ADDRESS			4.3 STREET	- 1							
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST	-ZIP					[] Change	e Addition	
TITLE		□ beceie	5.1 TITLE 5.2 NAME							,	
NAME				ADDRESS							
STREET ADDRESS			5.3 STREET						•		
CITY-ST-ZIP			5.4 CITY-ST	-ZIP					Change	e 🗍 Addition	
TITLE .	· .	☐ DELETE	6.1 TITLE						Change	Addialon	
NAME			6.2 NAME							ļ	
STREET ADDRESS			6.3 STREET	ADDRESS							

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 applicate 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.

6.4 CITY-ST-ZIP

SIGNATURE: