## AMOUNT DUE ON OR BEFORE 09/15/99: \$450 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000074574

Country

DAWSON GROUP, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME 1999

Principal Place of Business	Mailing Address		
1757 BRANCHWATER TRAIL ORLANDO FL 32825	1757 BRANCHWATER TRAIL ORLANDO FL 32825		
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27

2a. Mailing Address

City & State

Suite, Act. #. etc.

DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified

08/24/1998 Applied For Not Applicable

FILED

Jul 22, 1999 8:00 am

Secretary of State

07-22-1999 90013 013 \*\*\*150.00

\$8.75 Additional Fee Required

6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year V Yes

Intangible Personal Property. 29 30 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KIEFFER, ROBERT W 319 N. FERNCREEK AVE. ORLANDO FL 32803

``		Carl	Green	. Mccount	anl	CrA	_
32	Street Ac	dress (P	Box Number is i	Voy Acceptable)			
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13	-						
34	City	land	ļ <u>-</u>	EI	85   Z	ip Code 76	٠.
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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.

Country

agent. C	am ramiliar with, and accept the obligations of section			Green -07/29/99.			
SIGNATURE			ARKU (	7.5.00			
Signature, typed or printed name or registered agent angine in experience.							
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PT	DELETE	1.1 TITLE	Change Addition			
NAME	DAWSON, WILLIAM R		1.2 NAME				
STREET ADDRESS	1757 BRANCHWATER TRAIL		1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32825		1.4 CITY-ST-ZIP				
TITLE	VS [	DELETE	2.1 TITLE	Change			
NAME	DAWSON, CAROL A		2.2 NAME				
STREET ADDRESS	1757 BRANCHWATER TRAIL		2.3 STREET ADDRESS	3			
CITY-ST-ZIP	ORLANDO FL 32825		24 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE	Change Addition			
NAME			3.2 NAME				
STREET ADDRESS	الأسان والمنافع المراوات المنافع والمنافع والمنا	and a second	3.3 STREET ADDRESS	\$ \			
CITY-ST-ZIP			3.4 CITY-ST-ZTP				
TITLE		DELETE	4.1 TITLE	Change Addition			
NAME			4.2 NAME				

5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 8.2 NAME NAME 6.3 STREET ADDRESS 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. CITY-ST-ZIP

4 3 STREET ADDRESS

5.3 STREET ADDRESS

4.4 CITY-ST-ZIP 5.1 TITLE

5.2 NAME

DELETE

CR2E034 (5/99)

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Change Addition