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May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90168 043 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000087625

1. Corporation Name  
G. KEITH QUINNEY, JR., P.A.



Principal Place of Business: 2120 SPENCE AVE. TALLAHASSEE FL 32312  
Mailing Address: 2120 SPENCE AVE. TALLAHASSEE FL 32312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1998

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 Country

2a. Mailing Address

26 P.O. Box 14793 Suite, Apt. #, etc.

28 Tallahassee FL City & State

29 32312-4793 USA Zip Country

4. FEEL Number

59-3507496

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

QUINNEY, G. KEITH JR.  
2120 SPENCE AVE.  
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE: D  
NAME: QUINNEY, G. KEITH JR.  
STREET ADDRESS: 2120 SPENCE AVE.  
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: [ ] DELETE  
NAME: [ ]  
STREET ADDRESS: [ ]  
CITY-ST-ZIP: [ ]

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STREET ADDRESS: [ ]  
CITY-ST-ZIP: [ ]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [ ] Change [ ] Addition  
1.2 NAME [ ]  
1.3 STREET ADDRESS [ ]  
1.4 CITY-ST-ZIP [ ]

2.1 TITLE [ ] Change [ ] Addition  
2.2 NAME [ ]  
2.3 STREET ADDRESS [ ]  
2.4 CITY-ST-ZIP [ ]

3.1 TITLE [ ] Change [ ] Addition  
3.2 NAME [ ]  
3.3 STREET ADDRESS [ ]  
3.4 CITY-ST-ZIP [ ]

4.1 TITLE [ ] Change [ ] Addition  
4.2 NAME [ ]  
4.3 STREET ADDRESS [ ]  
4.4 CITY-ST-ZIP [ ]

5.1 TITLE [ ] Change [ ] Addition  
5.2 NAME [ ]  
5.3 STREET ADDRESS [ ]  
5.4 CITY-ST-ZIP [ ]

6.1 TITLE [ ] Change [ ] Addition  
6.2 NAME [ ]  
6.3 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)(l), 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:

*G. Keith Quinney Jr.*  
G. Keith Quinney Jr., Secretary  
Date: 5/4/99 Daytime Phone #: 889 385

CR2E034 (11/98)