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 # P98000096656

1. Corporation Name

ALL AMERICAN AGENCY, INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90026 016 ***150.00



Principal Place	of Business	Mailing Address								
1830 ROBERTS LANDING ROAD POST OFFICE BOX 2121										
WINDERMERE FL 34786 WINDERMERE FL						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed				
	•					11/13/1998				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21 All American Acque 26 All amorican				1 Harney		62-1748071			Not Applica	ble
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	1	•	5 Additional	ŀ
22 2170 111 Coloner Dr. 27 P.O. Boy 21						5. Certificate of Status Desired	J	Fee	Required	
- City & State						6. Election Campaign Financing			May Be	
23 0 4 0	undo FI.	28 Windum		ر ـ	<u> </u>	Trust Fund Contribution	<u> </u>		d to Fees	-
Zip	Country	Zip	_ Cou		~ - 0	8. This corporation owes the current		ngible □ Yes	□No	
24 3281			10 <i>O</i>	7	ange	Personal Property Tax. 10. Name and Address of New Regi			1110	\dashv
	g. Name and Address of Current I	Registered Agent		81	Name	10. Name and Address of New York	3101007	90		\neg
GAN	INAWAY, ALBERT C JR.			82						
1830 ROBERTS LANDING ROAD					Street Addr	ess (P.O. Box Number is Not Acceptable)				}
WINDERMERE FL 34786				83		,				\dashv
				84	City			85 Z	ip Code	-
					-		FL	Щ		
office or r	edictored agent or both in the State of	Florida, Such change was auf	nonzec	ו עם נ	-named corp he corporatio	oration submits this statement for the purpor's board of directors. I hereby accept the	ose or c appoint	nanging ment as	registered	,0
agent. I a	m familiar with, and accept the obligation	ns of, Section 607.0505, Florid	ia Siau	ules.						
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	Registered	Agent	signature require		DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND			
TITLE	PD	☐ DELETE	1.1 T	TLE				Chang	ge ∐Add	noitic
NAME	Gannaway, Albert C Jr.	•	1.2 N	AME						
STREET ADDRESS	1830 ROBERTS LANDING ROAD		1.3 \$1	TREET	ADDRESS					-
CITY-ST-ZIP	WINDERMERE FL 34786		•	TY-ST-	-ZIP			<u> </u>		dition
TITLE	VP	· DELETE	2.1 TC	TLE				Chang	je ∐ Ado	JIOH
NAME	JENNINGS, KIMBROUGH D		2.2 N/	AME						
STREET ADDRESS	2120 WEST COLONIAL DRIVE		2.3 S1	IREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32804	- I a servere		ITY-ST	-ZIP			Chang	ie [] Add	dition
TITLE	STD	DELETE	3.1 TI					∏ Cirailé	le 🗀 🗥 u	110011
NAME.	GANNAWAY, MARY		3.2 N							}
STREET ADDRESS	1830 ROBERTS LANDING ROAD				ADDRESS					
CITY-ST-ZIP	WINDERMERE FL 34786	☐ DELETE	3.4. C	TY-ST	I-ZIP			Chang	ge □ Ade	dition
TITLE			4.1 II							Ì
NAME		,			ADDRESS		•			
STREET ADDRESS			1	ITY-ST						
CITY-ST-ZIP		☐ DELETE	5.1 TI		-214			Chang	je ∐Ado	dition
TITLE NAME			5.1 N							-
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				ITY-ST						
TITLE		☐ DELETE	6.1 TT	TLE				☐ Chang	ge □ Add	dition
NAME		_	6.2 N	AME						
STREET ADDRESS	·		6.3 S	TREET	ADDRESS					\
			M .			•				

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, with all other like empowered.

SIGNATURE: