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 # P98000099388

1. Corporation Name

GLEN ABBEY NORTH, INC.

Principal Pla	ace of Business	Mailing Address					
36 SOUTH U.S	S. HIGHWAY 17-92	36 SOUTH U.S. HIGHW	NAY 17-92				
SUITE 100		SUITE 100					
DEBARY FL 32713 DEBARY FL 32713					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed		
					11/25/199 <u>8</u>		
2. Principal	Place of Business	2a. Mailing Address			4. FEI Ni mber	(Ap	r lied For
21 26					1 59- 25784	+ / No	t Applicable
Suite An	nt # etc	Suite, Apt. #, etc				\$8.75	viditional
Suitē, Apt. #, etc. 22					5. Certifc ate of Status Desired	Fee Re	
	nto	City & State			6. Election Campaign Financing	\$5.00	t toy Bo
					Trust Fund Contribution	Added t	•
23				oto.			
	Zip Country Zip				8. This corporation owes the current ye	ear ⊓tanglole ☐ Yes	I⊒No
24	25	29	30		Persor al Property Tax.		
	9. Name and Address of Cu	irrent Registered Agent		B4 No	10. Name and Address of New Regist	ere u Ayent	
5 0.4	NE DUOCEL W			81 Name			
DIVINE, RUSSELL W				82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	WEST CENTRAL BOULEVARD			2.700.7	((
Sur	TE 260			83			
ORL	LANDO FL 32801						
}				84 City		85 Zip (Code
SIGNATUE	am familiar with, and accept the o						
	Signature, typed or printed name of registere			Agent signature requi	ADDITIONS/CHANGES TO OFFICE	NE AND DIRECTO	DC IN 12
12.	. ,	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	PTD	☐ DELE	TE 1.1 TI	ILE		Change	☐ Addition
NAME	GRAY, JOHN C JR.		12 N	WE			
STREET ADDRES	ss 36 SOUTH U.S. HIGHWAY 1	17-92 #100	1.3 ST	REET ADDRESS			
CITY+ST-ZIP	DEBARY FL 32713		1.4 CI	TY-ST-ZIP			
TITLE	VSD	DELE:	TE 2.1 TI	TLE .		☐ Change	☐ Addition
NAME	SEGAL, WILLIAM M	• •	2.2 N	ME !			
		17.02 #100		REET ADDRESS			
STREET ADDRES		II GL TIUU	1				
CITY-ST-ZIP	DEBARY FL 32713	☐ DELE		TY-ST-ZIP		☐ Change	Addition
TITLE	-	□ DELE	1	1			
NAME			3.2 N	į			
STREET ADDRES	SS			REET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE		☐ DELE	TE 4.1 TI	TLE		Change	Addition
NAME			4.2 N	AME			
STREET ADDRES	ss		4.3 \$	REET ADDRESS			
CITY-ST-ZIP			4.4 C	TY-ST-ZIP			
TITLE		DELE				☐ Change	Addition
	1	_ 50	5.2 N	ſ		•	
NAME				REET ADDRESS			
STREET ADDRES	SS						
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		☐ DELE	1			Change	☐ Addition
NAME	1		6.2 N	ME I			

14. I heretly 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 changes, so on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE: *

STREET ADDRESS

CITY-ST-ZIP

byw C. GRAYS JR. Date

Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90003 029 ***300.00