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

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



DOCUMENT # P98000105971

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90284 039 ***150.00

DEMNER	& ASSOCIATES, INC.									
Principal Place of Business Mailing Address] (03)(49) (15 JUIO) (D()) 00))) DO((DA)()	il 40 i 0 1 0 1111	# 18()) 18		
1809 E CHERYL DRIVE 1809 E CHERYL DRIVE										
WINTER PARK FL 32792 WINTER PARK FL 32792						DO NOT WRITE IN THIS SPACE				
						3. Date ir corporated or Qualifed				
}						12/15/1998				
Principa Place of Business 2a. Mailing Address						4 FEI Number		App ied For		
21		26				59-3546418		Not	t Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				.5Certificate of Status Desired			Additional	
22		27				-5Controlle of Olaras Beauto	F	ee Re	quired	
City & Sta	te	City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution	A	dded to	o <u>Fees</u>	
Zip				Country		8. This corporation owes the current year	12/		ran-	
24	25	29 3	D			Personal Property Tax.	X Ye		[]No	
	9. Name and Address of Curre	nt Registered Agent	8	4	Name _	10. Name and Address of New Register	ad Agent			
DELINIED SCOTT A				•	Name					
DEMNER, SCOTT A 1809 E CHERYL DRIVE			82	2	Street Aadr	ress (P.O. Box Number is Not Acceptable)				
	TER PARK FL 32792		83	2						
AAIIAI	IEN FANN FL 32/92		0.	۱,						
			84	1	City		EL 85	· ·		
11. Pursuant office cr agent.	to the provisions of Sc ctions 607.05 registered agent, or bo h, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statu:es e of Florida. Such change was auth ations of, Section 607.0505, Florid	the above norized by a Statute	ve-r y th	named corp e corporation	poration submits this statement for the purpose ion's board of cirectors. I hereby accept the ap	of chang pointmen	ing its t as req	r agistered gistered	
SIGNATURE	Signature, typed or printed na ne of registered ag	ent and title if applicable (NOT:: R	eastered Aa	ent s	ionature require	ed when reinstating) DATE				
12.			13.			ADDITIONS/CHANGES TO OFFICERS	AND DIF	ECTO	FS IN 12.	
TITLE	D	☐ DELETE	1.1 TITLE					hange	Addition	
NAME	DEMNER, SCOTT A		1.2 NAME							
1	1809 E CHERYL DRIVE		1.3 STRE		DDRESS					
CITY-ST-ZIP	WINTER PARK FL 32792		14 CITY-ST-ZIP		ZIP					
TITLE	PVST	☐ DELETE	2.1 TITLE				□c	hange	☐ Addition	
NAME	DEMNER, SCOTT A		2 2 NAME							
STREET ADDRESS	1809 E CHERYL DRIVE		23 STREET ADDRESS		DDRESS					
CITY-ST-ZIP	WINTER PARK FL 32792		2.4 CITY-ST-ZIP		ZIP	· · - -				
TITLE		☐ DELETE	3.1 TITLE				□c	hange	☐ Addition	
NAME			3.2 NAME							
STREET ADDRÉSS			3.3 STRE	3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY-	-ST-	ZIP					
TITLE			4.1 TITLE	4.1 TITLE			C	hange	☐ Addition	
NAME			4. 2 NAME	E						
STREET ADORESS	s		4.3 STRE	ETA	DORESS					

6.4 CITY-ST-ZIP 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 ooth; 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE

□ DELETE

☐ DELETE

CR2E034 (11/98)

☐ Change

☐ Change

☐ Addition

☐ Addition