Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90096 024 ***150.00

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 # C37347

1. Corporation	Name 2000, INC.	,								
Principal Place of Business Mailing Address						- 1 18611818 191	11111 10000 511	II QUYU IQQI BIBIL	MINII AIBII MINII MI	
4400 EL CONQUISATADOR PKWY 4400 ELCO		4400 ELCONQUISTADOR PK	ELCONQUISTADOR PKWY							
SIE 27-		\$TE-27	\$TE-27			DO NOT WRITE IN THIS SPACE				
			BRADENTON FL 34210			3. Date Incorporated or Qualifed				
US		US				03/07/1991	eu or Quan	leu		
2 Driveinel Di	lean of Business	2a. Mailing Address				4. FEI Number			Ani	plied For
2. Principal Place of Business		26				59-3064423				t Applicable
21 Suite, Apt. #, etc.			Suite, Apt. #, etc.			"			\$8.75 A	
22 In. Te 1		27 Suite 1				5. Certifcate of St	atus Desire	d 🗆	Fee Re	
City & State		City & State				6Election Campa	ign Financi	ng -	- \$5.00	Mav Be
23		28				Trust Fund Cor			Added to	•
Zip	Country	Zip	Country			8. This corporatio	owes the	current year I	ntangible	
24	25	29	30			Personal Prope				ØNo
	9. Name and Address of Curre	ent Registered Agent				10. Name and Ad	iress of Ne	w Registered	d Agent	
			81	Name	•					
GRIFFIN, PATRICIA G			82	Street	Addre	ss (P.O. Box Numbe	is Not Acc	eptable)		
4400 EL CONGRISTADOR PKWY									-	
SUIT			83							
BRADENTON FL 34210			84	City					85 Zip C	Code
	to the provisions of Sections 607.05			,				F	L `	
office or ragent. I a	to the provisions of Sections our, see egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag	ations of, Section 607.0505, Flori	da Statutes	•		when reinstating)	I nereby a	DATE	Dinument as reg	JISTO GU
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	P	☐ DELETE	1.1 TITLE			• • • • • • • • • • • • • • • • • •			Change	· 🔲 Addition
NAME	GRIFFIN, JAMES A. III		1.2 NAME							
STREET ADDRESS 4400 EL CONGUISTADOR PKW		WY. STE 1	1.3 STREET ADDRESS							•
CITY-ST-ZIP	BRANDTON FL 34210	,	1.4 CITY-S	T-ZiP	$\mid \mathcal{B} \mid$	RADENTOI	v FL	. 342,	10	
TITLE	VP	☐ DELETE	2,1 TITLE						Change	Addition
NAME	GRIFFIN, PATRICIA G.		2.2 NAME							
STREET ADDRESS	4400 EL CONGUISTADOR PK	WY, STE 1	2.3 STREET	ADDRESS	;					
CITY-ST-ZIP	BRADENTON FL 34210		2.4 CITY-5	T-ZIP	1 .					
TITLE		☐ DELETE	3.1 TITLE						☐ Cḥange	☐ Addition
NAME			3.2 NAME		1					
STREET ADDRESS	ŒSS		3.3 STREET ADDRESS		3					•
CITY-ST-ZIP			3.4. CITY-ST-ZIP							·
TITLE		☐ DELETE	4,1 TITLE						Change	☐ Addition
NAME			4, 2 NAME		1					
STREET ADDRESS			4.3 STREE	ADDRESS	8					
CITY-\$T-ZIP			4.4 CITY-S	T-Z)P	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
TITLE	☐ DELETE		5.1 TITLE						Change	☐ Addition
NAME			52 NAME		1			•		
STREET ADDRESS				ADDRESS	5					
CITY-ST-ZIP		——————————————————————————————————————	54 CITY-S	T- ZIP	-					
TITLE		☐ DELETE	6.1 TITLE						☐ Change	☐ Addition
NAME			6.2 NAME							
OTDEET ADDDESS	1		■ 6.3 STREE	TADDRÉSS)					

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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: (

STREET ADDRESS