## 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 # \$43372

1. Corporation Name

TAYLOR INVESTMENTS, INC.

FILED
Feb 22, 1999 8:00 am
Secretary of State
02 22 1000 00014 007 ***150 00

02-22-1999 90014 007

Principal Place of Business Mailing Address								=-
101 E KENNEDY BLVD 101 E KENNEDY BLVD				,				
SUITE 4000		SUITE 4000				DO NOT WRITE IN THIS SPACE		
TAMPA FL 3360	FL 33602 TAMPA FL 33602 US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
US		US				04/05/1991		
A Drivetaal D	less of Divisions	2a. Mailing Address				▲ FEI Number	Applied For	┨
				Α.		59-3072639	Not Applicable	┨
	Ant # etc. Suite. Apt. #, etc.			MY		_ \$8.	5 Additional	1
Suite, Apt.						l e Coeffonto of Statue Desired I I	e Required	
City & Stat	te City & State					6. Election Campaign Financing 55.	00 May Be	1
— <u>∸</u>				_			led to Fees	1.
Zip Zip	Country	Zip Lamper	て <u>らり</u> Cou	intry		a. This corporation owes the current year Intangible	*********	1
24 3365	`.	29 33629	_	υS	A	Personal Property Tax.		
24 3562	g Name and Address of Curren		100			10. Name and Address of New Registered Agent		1
	3. Hallo allo la			81	Name			1
LUB	RANO, ANDREW J			<u></u>				-
101 E KENNEDY BLVD				82 3	Street Addre	ess (P.O. Box Number is Not Acceptable)		-
SUITE 3700				83			•	7
TAMPA FL 33602							_	
				84 (	City	FL   85	Zip Code	Ì
44 Durayant	to the provisions of Sections 607.050	2 and 607 1508 Florida Stat	tutes the a	hove-n	amed como	pration submits this statement for the purpose of changing	g its registered	1
office or r	registered agent, or both, in the State	of Florida. Such change was	autnorized	a by the	e corporatio	n's board of directors. I hereby accept the appointment	is registered	
agent, fa	m familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Stat	utes.				
SIGNATURE	Signature, typed or printed name of registered age	at and title if applicable /NC	TE: Bogisterer	Accent si	anature required	when reinstating) DATE		۱,
42		ID DIRECTORS	13.	<u> </u>	grizato rodanos	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	<u>ا</u> ۾
12. TITLE	PST DELETE 1.11					Cha		<u>ا</u> آ
NAME	BURT, JAMES, II			AME				
STREET ADDRESS	000 F DAMO DIAD			TREET AL	DRESS			١
CITY-ST-ZIP	TAMPA FL			ITY-ST-Z				8
TITLE	174M A 1 C	DELETE 2.1 TO				Cha	nge	٦ ٦
NAME			2.2 N					1
STREET ADDRESS				TREET AC	DRESS	•		
ì			- 1	CITY-ST-2	1			1
CITY-ST-ZIP		☐ DELETE	3.1 T		<del></del>	☐ Che	nge 🔲 Addition	ī
NAME			3.2 N					
1				TREET AL	DRESS			1
STREET ADDRESS				CITY-ST-Z				
CITY-ST-ZIP TITLE		□ DELETE	4,1 T		<del>-</del>	□ Cha	nge	1
			4.21					ĺ
NAME				A ANT				1
STREET ADORESS				TOEET AT	INDESS	<u>.</u>		
CITY-ST-ZIP		_ Section	4.3 \$	TREET AL				
	-		4.3 S 4.4 C	ITY-ST-Z			nge 🔲 Additior	1
		☐ DELETE	4.3 \$	ITY-ST-Z			nge 🗀 Additior	
NAME			4.3 \$' 4.4 C 5.1 T 5.2 N	ITY-ST-Z ITLE IAME	IP .		nge 🗋 Additior	1
NAME STREET ADDRESS			4.3 \$ 4.4 C 5.1 T 5.2 N 5.3 \$	ITY-ST-Z ITLE IAME TREET AL	DDRESS .		nge 🗖 Additior	<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C	ITY-ST-Z ITLE IAME ITREET AL	DDRESS .			
NAME STREET ADDRESS CITY-ST-ZIP TITLE			4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 Ti	ITY-ST-Z ITLE IAME TREET AL ITY-ST-Z	DDRESS .			
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	ITY-ST-Z ITLE IAME TREET AL ITY-ST-Z	DDRESS			

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, prior an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

产品基 塚田島

January & 1999