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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 17, 1999 8:00am

Secretary of State

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # S57598 NCE SECURITY AND PATR					02-17-1999 900			
Principal Place	of Business	Mailing Address	-			I I PRINTED IN BUILDING): 6 17 6 7 6 11 6 1 6 11 6 1	
2728 KEYSTONE DR ORLANDO FL 32806 US		2828 EUSTON ROAD WINTER PARK FL 32789			DO NOT W	RIT <u>E</u> IN THIS	SPACE	- ,	
						Date Incorporated or Qualife 06/06/1991	ed		
2. Principal Pl	ace of Business	2a. Mailing Address			4.	FEI Number	· ·	Apr	lied For
21		26				<u>59-3075091</u>			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5	Certificate of Status Desired		\$8.75 A	
22		27						Fee Red	<u> </u>
City & State	9	City & State				Election Campaign Financin	g 🗆	\$5.00	
23 28						Trust Fund Contribution		Added to	rees
Zip	Country Zip Co					This corporation owes the co	ırrent year In	tangible Yes	200
24	25	_ 1771	30			Personal Property Tax. Name and Address of Nev	Pogletored		/
	9. Name and Address of Curren	t Registered Agent	81	Name		Haine and Address of Nov	ritogistorou	- Agent	<u></u>
SITTI	LEY, ROBERT O								<u> </u>
2828 EUSTON ROAD			82	Street Add	dress (P	O. Box Number is Not Acce	ptable)		
WINTER PARK FL 32789			83	 -		- F	10 9 381.	37385	
WINTER FAIR FE 02700						有物源域的工程	<u> </u>	find the	
			84	City		THE REPORT OF	FI	85 Zip C	ode "
. office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the obligations of sections of the section of the	of Florida, Such change was aut tions of, Section 607.0505, Florid	tnorized by da Statutes.	tne comorau	ilion s bo	ard of directors, Frieleby acc	DATE	intment as reg	gistered
12.		D DIRECTORS	13.		P	ADDITIONS/CHANGES TO C	OFFICERS A	ND DIRECTO	RS IN 12
TITLE	DP	DELETE 1.1						Change	Addition
NAME	UTLEY, ROBERT O. 12N		1.2 NAME						* .
STREET ADDRESS	2828 EUSTON ROAD		1.3 STREET ADDRESS			•			
CITY-ST-ZIP	***************************************		1.4 CITY-ST	r- ZIP					
TITLE		☐ DELETE	2.1 TITLE	}				☐ Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADDRESS					
CITY-ST-ZIP	2.40			T-ZIP					
TITLE		☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME			3.2 NAME			,			
STREET ADDRESS			3.3 STREET	ADDRESS			17. 8 7 76		. * . * . / t . *
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				Change	☐ Addition
TITLE		☐ DELETE	4.1 TITLE					☐ change	. Dynami
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	1					
CITY-ST-ZIP		□ DELETE	4.4 CITY-S	r-ZIP				Change	Addition
TITLE		☐ DELETÉ	5.1 TITLE 5.2 NAME						
NAME			5.3 STREET	ADDRESS			* •		
STREET ADDRESS			5.4 CITY-S						· ,]
CITY-ST-ZIP		☐ DELETE	6.1 TITLE					[] Change	☐ Addition
TITLE		C) percie	6.2 NAME			•			
NAME STREET ADDRESS	*			ADDRESS					

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.

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP