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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S64626**

1. Corporation Name

GOLD VALLEY FLORIDA, INC.

FILED
Mar 10, 1999 8:00 am
Secretary of State
03-10-1999 90254 002 ***150 00



Principal Place of	of Business	Mailing Address			4 105 i 101 112 allill allill allilla littia alsi allilla di Str Allan arati alani arati	
DESOTO SO MALL 30305 HWY 30 BLVD W. S905 BRADENTON FL 34205 US		C/O JOAN D. BEER 925 NW 22 ST GAINESVILLE FL 33603 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	7
	•				07/08/1991	_
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number Applied For	1
21		26			59-3076857 Not Applicable	-
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required	
City & State		City & State			6. Election Campaign Financing S5.00 May Be	┪ .
23		28	.—			J <u>-</u>
Zip	Country	Zip	Cour	try	8. This corporation owes the current year Intangible	}
24	25	29 30	<u>) </u>		Personal Property Tax. Yes No 10. Name and Address of New Registered Agent	-
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered Agent	4
CAPITA	AL CONNECTION				(D.C. D. M. shavia Not Accordable)	-{
417 E	VIRGINIA ST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE				83		
TALLA	HASSEE FL 32301		}	84 City	B5 Zip Code	-
					FL as the supposed shooting its registered	4
office or rec	ristored agent or both in the State (of Florida. Such change was auth	orized	by the corpora	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	-
agent. I am	familiar with, and accept the obligat	ions of, Section 607.0505, Florida	a Statu	les.		
SIGNATURE s	Ignature, typed or printed name of registered agen	t and title if applicable. (NOTE: Re	gistered	gent signature requi	ired when reinstating) DATE	هَ ل
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	Ì
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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 suppliemental 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR