## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT -CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF COPPORATIONS

## FILED Aug 27, 1999 8:00 am Secretary of State

08-27-1999 90003 018 \*\*\*150.00

1999	S. N. E. S.	DIVISION OF CORPORATIONS		
DOCUMENT #  1. Corporation Name	S87456			
EWING & ASSOCIAT	TES, INC.			

Principal Place	e of Business Mailing Address		T (621/614 1811 1811 1811 1811 1811 1811 1811 1					
8911 BLIND PASS RD 8911 BLIND PASS RD								
UNIT 314		UNIT 314			DO NOT WRITE IN THIS SPACE			
	RG BEACH FL 33706	ST PETERSBURG BEACH F	L 33706			E IN I I I I I	5PACE	<del></del> -
US					3. Date Incorporated or Qualified			
		T			10/14/1991	-	January Co.	-
2. Principal Pl		2a. Mailing Address		<u></u>	_ 4, FEI Number	•	Applied For	_
21 87//	<u> </u>	26			59-3092989		Not Applicat	
Suite, Apt.		Suite, Apt. #, et	$n$ $\epsilon$		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
22 37,	Pete Beach, TI	27						
City & State	·	City & State			6. Election Campaign Financing		\$5.00 May Be	-
23		28			Trust Fund Contribution		Added to Fees	_
Zip ma 1	7// Country	Zip	_ Cou	ntry	8. This corporation owes the curre	nt year	Yes X No	
24 557	106 25		<u>o</u> ,		Intangible Personal Property.	المحمدة والمحا	· / ~ · · · ·	$\dashv$
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New R	gistered A	gent	
E1A/1	ING, EDWARD A.			oi Name				
				82 Street Addr	ress (P.O. Box Number is Not Acceptal	ole)		
1	1 BLIND PASS RD							
1	T 314			83				
211	PETERSBURG BEACH FL 33706			84 City			85 Zip Code	_
						FL	1 1	
11. Pursuant	to the provisions of sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statutes,	the abo	ove-named corpo	ration submits this statement for the pu	pose of cha	inging its registered	
office or i	registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was aut ons of, section 607,0505. Flori	thonzed da Stati	i by the corporati utes.	ion's board of directors. I hereby accep	tne appoin	ment as registered	
SIGNATURE	Elwark G. E.	wind- Fdwar	,	1. Emin	a-TRESIDENT	8/2	1/97	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Register	ed Agent signature req		DATE		a
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTORS IN 12	
TITLE	Р	☐ DELETE	1.1 TH	Œ			Change Addit	tion   🔾
NAME	ewing, edward A.		1.2 NA	ME				8
STREET ADDRESS	8911 BLIND PASS RD #314		1.3 ST	REET ADDRESS				[
CITY-ST-ZIP	ST. PETERSBURG BCH FL		1.4 Cf1	Y-ST-ZIP				;
TITLE	VP	DELETE	2.1 TIT	re		[	Change Addit	ion \
NAME	EWING, CLAIRE E.		2.2 NA	ME	<u>-</u>	-		-
STREET ADDRESS	8911 BUND PASS RD #314		2.3 STI	REET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG BCH FL	~	2.4 CIT	ry-ST-ZiP				
TITLE		DELETE	3.1 TIT	<del></del>			Change Addit	tion
NAME			3.2 NA	ME		_	_ , _,	- {
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP			•	Y-ST-ZIP				
TITLE		DELETE	4.1 TIT				Change Addit	ion
		LL DELETE	4.2 NA			L	Onungo Addit	
NAME								
STREET ADDRESS				REET ADDRESS				}
CITY-ST-ZIP		——————————————————————————————————————		Y-ST-ZIP				
TITLE		DELETE	5.1 TIT			L	Change L Addit	IOII
NAME			5.2 NA					
STREET ADDRESS			5.3 STI	REET ADDRESS				
CITY-ST-ZIP			-	Y-ST-ZIP		<del></del>		
TITLE		DELETE	6.1 TIT	LE		Ļ	Change Addit	tion
NAME			6.2 NA	ME				ĺ
STREET ADDRESS		•	6.3 ST	REET ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-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 changed or on an attachment with an address.

610066-90003-R 587456

**Ewing** . & Associates, Inc. august 21, 1999 Dept, of State Division of Corporations P.O. Bop 6327 Tallahussee, Fl. 32314 atti accounts Bazable Dear Midane or Sir, I am enclosing a copy of my 1999 annual Seport, (Hocument # 587451) fleently I received a "2nd Notice" for \$150 + 400 late penalty. as you will note I have been incorporated since 1991 & have never failed to pay my fee on time. Since I never received a "Ist Notice I feel it is only right to settle this account with the \$150 fee enclosed, Thank you for your assitance on this matter. Very truly yours Edwardh. Ewing, Kres.

P.O. BOX 66274 • ST. PETE BEACH, FLORIDA 33736