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

FILED Mar 24, 1999 8:00 am Secretary of State

 $\equiv : \exists$

≣ ::

 $\equiv i \tilde{z}$

= 44

03-24-1999 90024 030 ***150.00

DOCUMENT # \	/26061	OK

Corporation N	-141 # 420001	ok .									
Principal Place of	of Business	Mailing Addres	ss								
38 WINTER HAVE		1304 SNUG HA									
38 WINTER HAVEN FL 33882 MARIETTA GA 30066 US					DO NOT WRI	TE IN THIS S	PACE				
		03					3. Date Incorporated or Qualifed 04/03/1992		1-	<i></i>	
		2a. Mailing Ad	idress		_		4. FEI Number ,		-	Applie	pplicable
2. Principal Plac	ce of Business	26	. .				59-3114983		\$8.7	75 Add	
Suite, Apt. #,	etc.	Suite, Apt.	#, etc.				5. Certifcate of Status Desired		~	e Requi	
2	, 5.0.	27					6. Election Campaign Financing		\$5.	.00 ма	av Be
City & State		City & Sta	ite				6. Election Campaign Financing Trust Fund Contribution			ded to F	
Zip	Country	28		Count	try		This corporation owes the cur Personal Property Tax.	rent year Inta	ngible Yes]No
4	25	29		30			10. Name and Address of New	Registered A	gent		
<u></u>	9. Name and Address of Curren	t Registered Age	nt ·	- 8	81 N	lame	10.				
01.40	MARTIN DURY C				- Į		ess (P.O. Box Number is Not Accep	table)			
	kwell, ruby C. Venur K S.E.			8	82 S	Street Addre	ess (P.O. Box Number is Not Accep				
APT.				8	83						
	ER HAVEN FL 33880		,	<u> </u>	<u>. .</u>				85	Zip Co	de
4416414	CIT I IVACIT I C 00000					City		<u>FL</u>	بلب		
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607.050 egistered agent, or both, in the State n familiar with, and accept the obliga	02 and 607.1508, F of Florida. Such c ations of, Section 6	607.0505, Flon	noa Statut	nes.		· 		changi	ng its re as regis	egistered stered
agent. 1 ar	on familiar with, and accept the obligation familiar with, and accept the obligation of familiar with a second of famili	nt and title if applicable. ND DIRECTORS	(NOTE:	noa Statut	Agent si		poration submits this statement for the on's board of directors. I hereby according to the order of the order	DATE	ID DIR		
agent. I ar	on familiar with, and accept the obligation familiar with accept the obligation familiar with accept the obligation familiar with a construction familiar with a cons	nt and title if applicable. ND DIRECTORS	607.0505, Flon	Registered A	Agent si		d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AND SCHIMP, PARK E	nt and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 TITE 12 NAV	Agent si	gnature require	d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE	nt and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 TITE 12 NAV	Agent signal	gnature require	d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AP D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 TITE 12 NAV	Agent signal sig	gnature require	d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D	ations of, Section 6 and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 TITE 12 NAI 1.3 STE	Agent si	gnature require	d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL	ations of, Section 6 and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 TITL 12 NA 1.3 STE 1.4 CIT 2.1 TITL 2.2 NA 2.3 ST	Agent sk TLE ME REET AL TY-ST-Z TLE AME	DDRESS DDRESS	d when reinstalling)	DATE	ID DIR	ECTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL	ations of, Section 6 and and title if applicable. ND DIRECTORS	O7.0505, FION	Registered A 13. 1.1 Tm 12 NA 13 STF 14 CT 2.1 Tm 2.2 NA 2.3 ST 2.4 CL	Agent sid	DDRESS DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR	S IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AND SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE	ations of, Section 6 and and title if applicable. ND DIRECTORS	(NOTE:	Registered A 13. 1.1 Tits 12 NAV 13 STF 14 CIT 22 NA 23 ST 2.4 CI 3.1 TITs	Agent sin	DDRESS DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AND SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE	ations of, Section 6 and and title if applicable. ND DIRECTORS	O7.0505, FION	Registered A 13. 1.1 TITL 12 NA 13 STF 14 CIT 21 TITL 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA	Agent six TLE WE REET AC TY-ST-2 TLE AME TREET AC TTY-ST-1 TLE TREET AC TTY-ST-1 TLE	DDRESS DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	O7.0505, FION	Registered A 13. 1.1 TITL 12 NAJ 13 STF 14 CIT 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA 33 ST	Agent sin	DDRESS ZIP DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange hange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	DELETE DELETE	Registered A 13. 1.1 TITL 12 NAJ 13 STF 14 CIT 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA 33 ST	Agent sk TLE ME TY-ST-2 TLE AME TREET ACTY-ST- TILE IME TREET ACTY-ST- TILE AME TREET ACTY-ST- TILE AME TREET ACTY-ST-	DDRESS ZIP DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	O7.0505, FION	Registered # 13. 1.1 TITL 12 NAJ 13 STF 14 CIT 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA 33 ST 34 C 4.1 TITL 4 TITL 4 TITL 4 TITL 5 TITL 5 TITL 5 TITL 6 TITL 6 TITL 6 TITL 7 TITL	Agent sk TLE ME TY-ST-2 TLE AME TREET ACTY-ST- TILE IME TREET ACTY-ST- TILE AME TREET ACTY-ST- TILE AME TREET ACTY-ST-	DDRESS ZIP DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange hange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	DELETE DELETE	Registered A 13. 1.1 TITU 12 NAJ 13 STF 14 CIT 21 THT 22 NA 23 ST 2.4 CI 3.1 TITU 32 NA 33 ST 34. C 4.1 TI 4.2 N	Agent six Agent six ILE ME TREET AI TIV-ST-2 TILE AME TREET A TILE TREET A TILE TREET A	DDRESS ZIP DDRESS	d when reinstalling)	DATE	iD DIR	ECTOR nange hange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	DELETE DELETE	Registered # 13. 1.1 TITL 12 NAV 13 STE 14 CIT 2.1 TITL 2.2 NA 2.3 ST 2.4 CI 3.1 TITL 3.2 NA 3.3 ST 3.4 C 4.1 TI 4.2 N 4.3 S	Agent six Agent six ILE ME TREET AI TIV-ST-2 TILE AME TREET A TILE TREET A TILE TREET A	DDRESS ZIP DDRESS ZIP ADORESS - ZIP ADORESS	d when reinstalling)	DATE		ECTOR hange hange	Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	DELETE DELETE	Registered # 13. 1.1 TITL 12 NAV 13 STE 14 CIT 2.1 TITL 2.2 NA 2.3 ST 2.4 CI 3.1 TITL 3.2 NA 3.3 ST 3.4 C 4.1 TI 4.2 N 4.3 S	Agent six Agent	DDRESS ZIP DDRESS ZIP ADORESS - ZIP ADORESS	d when reinstalling)	DATE		ECTOR nange hange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	OFLETE DELETE DELETE DELETE	Registered A 13. 1.1 TITU 12 NAJ 13 STF 14 CIT 21 TITU 22 NA 23 ST 2.4 CI 3.1 TITU 32 NA 33 ST 34. C 4.1 TIT 4.2 N 43 S 44 C 5.1 TI 52 N	Agent six Agent six ILE ILE INTY-ST-2 ILE AME ITTEET A ITT	DDRESS ZIP DDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	d when reinstalling)	DATE		ECTOR hange hange	Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	OFLETE DELETE DELETE DELETE	Registered A 13. 1.1 TITL 12 NAJ 13 STF 14 CIT 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA 33 ST 3.4 C 4.1 TIT 4.2 N 43 S 44 C 5.1 TI 52 N 53 S	Agent si LE LE REET AU TY-ST-2 TLE AME TREET A AME	DDRESS ZIP DDRESS ZIP ADORESS -ZIP ADORESS -ZIP ADORESS	d when reinstalling)	DATE		ECTOR hange hange	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	OFLETE DELETE DELETE DELETE	Registered A 13. 1.1 TITU 12 NAJ 13 STF 14 CIT 21 THT 22 NA 23 ST 2.4 CI 3.1 TITU 32 NA 33 ST 3.4 C 4.1 TI 4.2 N 43 S 44 C 5.1 TI 52 N 53 S 54 C	Agent si LE LE REET AL REET AL CITY-ST-Z LE AME TREET A CITY-ST TILE NAME STREET CITY-ST TILE NAME STREET CITY-ST TILE TREET A CITY-ST TILE TREET A CITY-ST TILE TREET A CITY-ST TILE TREET A CITY-ST TREET A CITY-ST TREET A CITY-ST	DDRESS ZIP DDRESS ZIP ADORESS -ZIP ADORESS -ZIP ADORESS	d when reinstalling)	DATE		ECTOR hange hange	Addition Addition Addition Addition
SIGNATURE 12. TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	OFLETE DELETE DELETE DELETE	Registered A 13. 1.1 TITL 12 NAV 13 STF 14 CIT 22 NA 23 ST 2.4 CIT 32 NA 23 ST 2.4 CIT 32 NA 4.5 TITL 4.2 NA 4.5 ST 4.4 CIT 5.1 TITL 5.2 NA 6.1 TITL 5.3 SS 5.4 C 6.1 TITL 6.	Agent six Agent six IREET AI TY-ST-2 TLE AAME TREET AI TITLE TITLE NAME TITLE NAME TITLE NAME TITLE TITLE NAME TITLE	DDRESS ZIP DDRESS ZIP ADORESS -ZIP ADORESS -ZIP ADORESS	d when reinstalling)	DATE		ECTOR hange hange Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AT D SCHIMP, PARK E 1304 SNUG HARBOR CT NE MARIETTA GA 30066 D SCHIMP, NANCY BLACKWEL 1304 SNUG HARBOR CT NE MARIETTA GA 30066	ations of, Section 6 and and title if applicable. ND DIRECTORS	OFLETE DELETE DELETE DELETE	Registered # 13. 1.1 TITL 12 NAJ 13 STF 14 CIT 21 THT 22 NA 23 ST 2.4 CI 31 TITL 32 NA 33 ST 3.4 C 4.1 TITL 4.2 N 43 S 44 C 5.1 TI 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	Agent si LE REET AL TY-ST-2 TLE AME TREET A TILE NAME STREET TILE NAME NAME NAME NAME NAME NAME	DDRESS ZIP DDRESS ZIP ADORESS -ZIP ADORESS -ZIP ADORESS -ZIP	d when reinstalling)	DATE		ECTOR hange hange Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AT OFF	ations of, Section 6 and title if applicable. ND DIRECTORS	DELETE DELETE DELETE DELETE	Registered A 13. 1.1 TITL 12 NAV 13 STF 14 CIT 21 TITL 22 NA 23 ST 2.4 CI 3.1 TITL 32 NA 4.2 NA 4.3 ST 4.4 CI 5.1 TITL 5.2 NA 6.3 S 5.4 C 6.1 T 6.2 NA 6.3 S	Agent sides Agent	DDRESS ZIP DDRESS ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	ed when remstating) ADDITIONS/CHANGES TO C	DATE DEFICERS AN		ECTOR hange hange Change	Addition Addition Addition Addition Addition

Indicated on this annual report or supplies much that manual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar 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 ar indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar 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 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 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 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 officer or director of the corporation or the receiver or trustee empowered.

Director - Secretary Maisurer 4/10/99