**FILED** 

Jan 28, 1999 8:00am

**Secretary of State** 

01-28-1999 90034 021 \*\*\*150.00

## 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 # V56164

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

530 KHA

CITY-ST-ZIP

TITLE

NAME

THE BAXTER GROUP INCORPORATED

Principal Place of Business Mailing Address								- i natu ariaan ariaa ariaa isidi dirki alah araki 1991 i		
5004 WISPERING HOLLOW PALM BEACH GARDENS FL 33418				5004 WISPERING HOLLOW PALM BEACH GARDENS FL 33418						
			•					DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualifed		
2. Principal	Place of Busi	ness	2a Ma	iling Address				08/04/1992		
21	•		26	ming Address				4. FEI Number Applied For		
Suite, Ap	t. #, etc.	<u>.</u>		te, Apt. #, etc.			<del></del>	65-0357728 Not Applicab		
22 City & St	ate	· · · · · · · · · · · · · · · · · · ·	. 27		<del></del>			5. Certificate of Status Desired See Required Fee Required		
23	ato	•	_	y & State				6. Election Campaign Financing \$5.00 May Be		
Zip		Country	28 Zip					Trust Fund Contribution Added to Fees		
24	-	25	29		Cou 30	intry		8. This corporation owes the current year Intangible		
9. Name and Address of Current Registered Agent						Г		Personal Property Tax. ☐ Yes ☐ No		
		* : : 1	Transport Control	- Agent		81	Name	10. Name and Address of New Registered Agent		
SC	hwencke,	Kerry R., Esquii	₹E							
		ACH LAKES BLVD	mig : 1.33	nai T			Street Addr	ress (P.O. Box Number is Not Acceptable)		
	ITE 290		-				<del>                                      </del>	The state of the s		
WI	PALM BEAC	H FL 33401	•			83	<u> </u>			
						84	City	85 Zip Code		
11. Pursuan	t to the provis	ons of Sections 607.	0502 and 607.15	i08: Florida Statute	es the at	201/0	agmed corp.	oration submits this statement for the purpose of changing its registered		
office or	registered ag: am familiar wi	ent, or both, in the Sta th, and accept the ob	ite of Florida. Si	ich change was ai	uthorized	by I	the corporatio	oration submits this statement for the purpose of changing its registered on a board of directors. I hereby accept the appointment as registered		
SIGNATURE		, and adopt the co	, dec	10/1 007.0303, Flor	nua Statu	ites.				
O/OHATOILE		or printed name of registered	egent and title if applic	able. (NOTE:	Registered /	Aaent	t signature required	d when reinstating) . 1 1 1 1 1 DATE		
12.	, ,	OFFICERS	AND DIRECTO	RS	13.	<u> </u>		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P · /			☐ DELETE	1.1 TIT	LE		☐ Change ☐ Addition		
NAME	BAXTER,				1.2 NA	ΜE		The state of the s		
STREET ADDRESS	5004 WHI	SPERING HOLLOW	l		1.3 STR	REET	ADDRESS	•		
CITY+ST-ZIP	PALM BE/	ACH GARDENS FL			1.4 CIT	Y-ST-	-ZIP			
TITLE .			<u> </u>	DELETE	2.1 1111		-	☐ Change ☐ Additio		
NAME	}				2.2 NAM	Æ				
STREET ADDRESS					2.3 STR	EET A	ADDRESS			
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TITLE SO	NEW AND A	with a straight	CTA C	☐ DELETE	3.1 TITL	E		☐ Change ☐ Addition		
NAME			ga fa ja	•	3.2 NAM	Æ				
STREET ADDRESS					3.3 STR	EET A	ADDRESS	C. S. C. S. C.		
CITY-ST-ZIP		133 233 2			3.4. CIT	Y-\$T-	-ZIP			
IIITE		•	•	☐ DELETE	4.1 TITL	E		Change:		
VAME	100	• ,		s., .	4. 2 NAM	Æ				
STREET ADDRESS		3 · · · ·	P.	· , -,	4.3 STRE	EETA	NODRESS			
CITY-ST-ZIP	, , , , , ,	<u> </u>			4.4 CITY	- \$T- Z	ZIP			
1	:			☐ DÉLETE	5.1 TITLE	=		☐ Change ☐ Addition		
IAME					5.2 NAM8	Ε	. 1	Tr. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

☐ Change

Addition