## 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 # V56663

Jan andrews-appraiser, Inc.								
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Principal Place of Business Mailing Address						***************************************		
6430 E BAY BLVD GULF BREEZE FL 32561 GULF BREEZE FL 32561 GULF BREEZE FL 32561			ı			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed	SPACE	
		1.0				08/06/1992		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	` ∙ ⊢	Applied For
21   26   Suite, Apt. #, etc. Suite, Apt. #, etc.					59-3145593		Not Applicable	
22		27	27		5. Certificate of Status Desired	Fee Required		
City & Stat	te	City & State			6. Election Campaign Financing \$5.00 May Be			
Zip	Country	28	Col	untry		Trust Fund Contribution		d to Fees
24	25	29	30			<ol> <li>This corporation owes the current year In Personal Property Tax.</li> </ol>	tangible XYes	□No
24	9. Name and Address of Curr		[30]	1		10. Name and Address of New Registered		
	St 4, 75, 12, 13, 16			81	Name			
	REWS, JEANETTE DE BAY BLVD			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	F BREEZE FL 32561			83		Commence of the commence of th	era eren kon	1 2000 PIZ 1280
						130分分別的國際關係的		
Marina of the or obj	3.75	at the property of the control of th		84	City	FL	85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida State of Florida, Such change wa	itutes, the a	bove	e-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	f changing	its registered
agent. I a	nm familiar with, and accept the oblig	gations of, Section 607.0505,	Florida Stat	utes.		the board of anociors. Thereby accept the appo	,	. 09.0.0
SIGNATURE								
12.	Signature, typed or printed name of registered a	gent and title if applicable. (N AND DIRECTORS	OTE: Registered		it signature require	d when reinsteting), DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	DPS	DELETE				50.8145630	Chang	
NAME	ANDREWS, JEANETTE	. –	1.2 N			AND STANDING	_ ,	_
STREET ADDRESS	ALOO E DAY DIVID				ADDRESS			
CITY-ST-ZIP	GULF BREEZE FL			ITY-S1		•		
TITLE	T	☐ DELETE	2.1 TF		····		Chang	e Addition
NAME	ANDREWS, JEANETTE	4	2.2 N	AME				-
STREET ADDRESS	3430 E BAY BLVD 2.3:		2.3 ST	TREET	ADDRESS			
CITY-ST-ZIP	GULF BREEZE FL	· · · · · · · · · · · · · · · · · · ·	2.4 C	TY-S	T-ZIP	•		
TITLE AND	THE RESERVE TO THE	DELETE	3,1 π	TLE	·		☐ Chang	e Addition
NAME OF THE			3.2 NA	AME				
STREET ADDRESS	SAME THE TO SERVE		3.3 ST	TREET	ADDRESS	\$P\$25 (第575)建筑的内部。	409 138 <b>2</b> 9	1708 Dates
CITY-ST-ZIP					T-7IP			
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			4.1 TT 4. 2 N	tle Iame		े प्राप्त के तिहासिक विकास के विकास के प्राप्त के प्राप्त के किया है है जिसे के प्राप्त के प्राप्त के प्राप्त क के ब्रोगीय के प्राप्त क	t.5 1 1 in in Stang	, , <u>(1</u> ) /00/10/1
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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 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 exampled, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 

Jan 28, 1999 8:00am

**Secretary of State** 

01-28-1999 90028 032 \*\*\*150.00