FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90080 036 \*\*\*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 # V59813

**BLAND & ASSOCIATES, INC.** 

			4			
Principal Place	e of Business	Mailing Address			BE 1111 E1E11 61E11 41E11 E	1911 91911 91911 1991
7380 SANDLAKE RD. 7380 SANDLAKE RD.		7380 SANDLAKE RD.				
SUITE 500 SUITE 500				DO NOT WRITE IN THIS SPACE		
ORLANDO FL 32819 ORLANDO FL 32819			DO NOT WRITE IN THIS SPACE			
US		US		3. Date Incorporated or Qualifed 08/24/1992		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number		Applied For
	EAST CENTRAL BLUL		NTRAL BLVD	59-3151403		Not Applicable
(Suite) Apt.		Suite Apt. #, etc.			\$8.7	5 Additional
22 305	, 413.	27 305		5. Certifcate of Status Desired	Fee	e Required
City & Stat	e	City & State		6. Election Campaign Financing	<b>_ \$5</b> .	00 May Be
23 ORLA		28 ORLANDO	FLORIDA	Trust Fund Contribution	1 1	led to Fees
Zip	Country	Zip	Country	8. This corporation owes the curre	ent year Intangible	
24 328	01 25 USA	29 32801 30		Personal Property Tax.	Yes	<b>□</b> 1√10
24) 020	9. Name and Address of Current	<u> </u>		10. Name and Address of New R	egistered Agent	
DI A	ND ANTHONY C		81 Name B	LAND ANTHONY	C.	
	ND, ANTHONY C. D-SANDLAKE <del>RD:                                    </del>		82 Street Address (P.O. Box Number is Not Acceptable)			
	ADBE	ESS CHANGE	801	7 GILLETTE C	LOURT	
UKL	ANDO FL 32819	, 0,124	83			}
			84 City OR	CLAN DO	FL 85	Zip Code 3 Z 8 3 G
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corp	oration submits this statement for the	purpose of changin	g its registered
office or r	registered agent, or both, in the State of mediate med	i Florida. Such change was auth	onzed by the corporation	on's board of directors. I hereby accep	t the appointment a	is registered
SIGNATURE						
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	gistered Agent signature required		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF		
TITLE	D	☐ DELETE	1,1 TITLE		Cha	nge
NAME	BLAND, ANTHONY C.		1.2 NAME		COURT	
STREET ADDRESS	-7380 SANDLAKE RD - A-DD.	RESS CHANGE ONLY ->	1.3 STREET ADDRESS 2	3017 GILLETTE	2 - 2 - 1	
C/TY-ST-ZIP	ORLANDO FL	ON 24 -7	1.4 CITY-ST-ZIP	ORLANDO, FL.	52836	
TITLE		☐ DELETE	2.1 TITLE	•	☐ Chai	nge 🗀 Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			)
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE	-	☐ DELETE	3.1 TITLE	-	☐ Cha	nge Addition
-NAME		· · -	3.2 NAME - +		•	~
STREET ADDRESS			3.3 STREET ADDRESS			ļ
			3.4. CITY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		☐ Cha	inge Addition
NAME			4. 2 NAME			
			4.3 STREET ADDRESS			
STREET ADDRESS		, i				]
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Cha	inge Addition
TITLE		- Deteir	5.2 NAME			
NAME			5.3 STREET ADDRESS		•	[
STREET ADDRESS			5.4 CITY-ST-ZiP			{
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Cha	nge
TITLE	L.		S			95

CTTY-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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

407246-0600