Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90008 041 \*\*\*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 # VEOSO2

1. Corporation TERESA	A. CHAPPELL, C.P.A., P.A.										
Principal Place of Business Mailing Address							i 1881( Birgin dirit netar Efiri dar	18 tial Bisit A	IBII BIBEI BIBII B	ENTI MENIS INDI	
10062 S. YACH TREASURE ISLA US	T CLUB DRIVE	10062 S. YACHT CLUB DRIVE TREASURE ISLAND FL 33706 US +			3.	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  08/27/1992					
2 Principal D	ace of Business	2a. Mailing Address				4.	FEI Number	Applied For			
`	ace of business	26				"	59-3140162		<del> </del>	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 A	,	
City & State	9	City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip				ountry	/	8.	This corporation owes the curre	ent year Int		r=1	
24	25 29 30						Personal Property Tax.	ĭ Yes □ No			
	9. Name and Address of Current	Registered Agent		81	Name	10.	. Name and Address of New R	egistered	Agent		
CHAPPELL, CHARLES D 1 <del>0128 YACHT CLUB DRIVE</del> TREASURE ISLAND FL 33706				82 83 84	City	<u>⇒2 S.</u> ——	P.O. Box Number is Not Accepta Yacht Club Drug	FL			
11. Pursuant i office or re agent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligat	and 607.1508, Florida Sta of Florida. Such change wa ons of, Section 607.0505,	atutes, the as authoriz Florida Si	abov ed by atutes	e-named c the corpor s.	orporation's b	n submits this statement for the oard of directors. I hereby accep	purpose of t the appoi	changing its ntment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (1)	IOTE: Registe	red Ane	nt signature rec	duired when	reinstating)	DATE		<del></del> . }	
12.	OFFICERS AN			3.	, organization of the		ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO	RS IN 12	
TITLE	DP	☐ DELETE	1.1	TITLE					☐ Change	Addition	
NAME	CHAPPELL, TERESA A.		1.3	NAME							
STREET ADDRESS	10062 S. YACHT CLUB DRIVE		1.3	STREE	TADDRESS						
CITY-ST-ZIP	TREASURE ISLAND FL 33706		1.4	CITY-S	ST-ZIP						
TITLE		☐ DELETE	2.	TITLE		_	•		Change	☐ Addition	
NAME			2.2	NAME							
STREET ADDRESS			2.3	STREE	TADORESS			•			
CITY-ST-ZIP			2.	4 CITY-:	ST-ZIP						
TITLE.		DELETE	3.	TITLE	-	-	1.5		Change	☐ Addition	
NAME			3.2	NAME	1					Ì	
STREET ADDRESS	•		3.3	3 STREE	T ADDRESS						
CITY-ST-ZIP				4. CITY-	ST-ZIP						
TITLE		☐ DELETE	4.	1 TITLE					. Change	Addition	
NAME				2 NAME							
STREET ADDRESS			4.	STREE	T ADDRESS						
CITY-ST-ZIP				CITY-S	ST-ZIP	_					
TITLE			5.	1 TITLE					Change	Addition	

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 of 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

☐ Change

Addition