

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  
Jul 08, 1999 8:00 am  
Secretary of State

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DOCUMENT # **V60619**  
Corporation Name  
**WILLIAM A. JACKSON CPA PA**  
**3210 N. WICKHAM RD. STE 5**  
**MELBOURNE, FL 32903**  
Principal Place of Business  
**3210 N. WICKHAM RD. STE 5**  
**MELBOURNE, FL 32935**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **8/22/92**  
4. FEI Number **59-3143224** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required  
6. Election Campaign Financing ☐ **\$5.00** May Be  
Trust Fund Contribution Added to Fees  
8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

Principal Place of Business  
26. Mailing Address **SAME.**  
Suite, Apt. #, etc.  
27. Suite, Apt. #, etc.  
City & State  
28. City & State  
Zip  
25. Country  
29. Zip  
30. Country

9. Name and Address of Current Registered Agent  
**WILLIAM A. JACKSON**  
**SAME AS ABOVE.**  
10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. Zip Code **FL**

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE  
OFFICERS AND DIRECTORS  
1. PRESIDENT  
WILLIAM A. JACKSON  
SAME AS ABOVE  
2. ☐ DELETE  
3. ☐ DELETE  
4. ☐ DELETE  
5. ☐ DELETE  
6. ☐ DELETE  
7. ☐ DELETE  
8. ☐ DELETE  
9. ☐ DELETE  
10. ☐ DELETE  
11. ☐ DELETE  
12. ☐ DELETE  
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE: **William A. Jackson** Date **6/10/99** Daytime Phone # **(407) 752 9967**

CR2E034 (11/98)