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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 22 1999 8:00 am  
Secretary of State

DOCUMENT # V71432

1. Corporation Name

BEELINE INVESTMENTS, INC.

Principal Place of Business

401 E. SEMORAN BLVD.  
CASSELBERRY FL 32707

Mailing Address

750 N. MAITLAND AVENUE  
MAITLAND FL 32751  
US

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 200 North Thornton Ave  
Suite, Apt #, etc

27 City & State  
28 Orlando, Florida

29 Zip Country  
30 32801

9. Name and Address of Current Registered Agent

SMITH, RANDALL C. ESQ  
750 N. MAITLAND AVENUE  
MAITLAND FL 32751

81 Name Randall C. Smith, Esq  
82 Street Address (P.O. Box Number is Not Acceptable)  
200 North Thornton Avenue  
83  
84 City Orlando FL 85 Zip Code 32801

11. 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: Block 13 and 14 are optional and should be completed only if applicable.)

(DATE)

2/25/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
D	KELLEY, ROBERT	401 E SEMORAN BLVD	CASSELBERRY FL	<input checked="" type="checkbox"/>
D	VEIGLE, CHARLES	4625 E LAKE DR	WINTER SPRINGS FL	<input type="checkbox"/>
D	VEIGLE, JIM	2752 LAKE HOWELL LN	WINTER PARK FL	<input type="checkbox"/>
S	VOEGTLIN, NANCY	401 E. SEMORAN BLVD.	CASSELBERRY FL 32707	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP

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\*\*\*150.00 \*\*\*150.00

(Signature)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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:

Nancy Voegtlin

Nancy Voegtlin, Sec

2/26/99

(407) 767-2977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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