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 Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90004 045 ***158.75

DOCUI	MENT # 359232	2						
	PROPERTIES, INC.							
Principal Place of Business Mailing Address					* 100188 13101 01310 18113 (1889 11710 1381	Albii Eibii Bibii bibii	D(01+ 01011 (001	
11617 INNFIELD	D\$ DR	11617 INNFIELDS DR						
A ODESSA FL 33556-6775					DO NOT WRITE IN	THIS SOACE		
ODESSA FL 33556-6775 US					DO NOT WRITE IN 3. Date Incorporated or Qualifed	THIS SPACE		ì
00					01/28/1970			
2. Principal Place of Business		2a. Mailing Address					pplied For	l
[21]		26		59-1324664	N	ot Applicable	İ	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75	Additional		
22		27			5. Certificate of Status Desired K	Fee R	equired	
City & State		City & State		6. Election Campaign Financing	•	May Be		
23		28		Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country	у	8. This corporation owes the current ye	ar Intangible	(XINo	
24	25 9. Name and Address of Curre		30		Personal Property Tax. 10. Name and Address of New Regist		LANO	
	5, Name and Address of Curren	in Negistered Agent	81	I Name	10. Hame and Address of New Regist	area Agent		
BLAI	nton, Henry H.							
11617 INNFIELDS DR			82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
SUIT			83	3				1
ODE	SSA FL 33556-6775						<u> </u>	
			84	City		FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abov	/e-named corp	oration submits this statement for the purpo	se of changing its	s registered	1
office or r	registered agent, or both, in the State	of Florida. Such change was au	ithorized by	the corporation	on's board of directors. I bereby accept the :	appointment as re	egistered	ı
agent, I a	im familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statute	S.	on a board of an oddor a. I more by a doopt and		-	ļ
agent. I a	im familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statute	S.	,			
agent. I a SIGNATURE	im familiar with, and accept the obligation of t	ations of, Section 607.0505, Flori ont and title if applicable. (NOTE:	ida Statute:	S. ent signature required	d when reinstating) DA	TE		á
agent. I a SIGNATURE 12.	im familiar with, and accept the obligation of signature, typed or printed name of registered age OFFICERS AN	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: ND DIRECTORS	Registered Age	s.		TE RS AND DIRECTO	ORS IN 12	1/00/
agent. I a SIGNATURE 12. TITLE	im familiar with, and accept the obligation of signature, typed or printed name of registered age OFFICERS AN	ations of, Section 607.0505, Flori ont and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE	s.	d when reinstating) DA	TE		(41/00)
agent. I a SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H	ations of, Section 607.0505, Flori ont and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME	S. ent signature required	d when reinstating) DA	TE RS AND DIRECTO	ORS IN 12	034 (44/00)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Flori ont and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	s. ont signature requirec	d when reinstating) DA	TE RS AND DIRECTO	ORS IN 12	OE024 (44/00)
agent. I a SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	s. ont signature requirec	d when reinstating) DA	TE RS AND DIRECTI ☐ Change	ORS IN 12 ☐ Addition	CD0E004 (44,00)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Flori ont and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	s. ont signature requirec	d when reinstating) DA	TE RS AND DIRECTO	ORS IN 12	CB2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	s. ent signature required ET ADDRESS ST-ZJP	d when reinstating) DA	TE RS AND DIRECTI ☐ Change	ORS IN 12 ☐ Addition	CB2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	s. ent signature required ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	TE RS AND DIRECTI ☐ Change	ORS IN 12 ☐ Addition	CD2E034 (44,08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Flori int and title if applicable. (NOTE: ND DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	s. ent signature required ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	TE RS AND DIRECTI ☐ Change	ORS IN 12 ☐ Addition	CD25034 (11/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Floring and title if applicable. ND DIRECTORS DELETE TE A	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	s. ent signature required ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	RS AND DIRECTO	ORS IN 12 Addition	CD2C034 (11/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Floring and title if applicable. ND DIRECTORS DELETE TE A	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	s. ent signature required ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	RS AND DIRECTO	ORS IN 12 Addition	CD2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Floring and title if applicable. ND DIRECTORS DELETE TE A	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ent signature required ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	RS AND DIRECTO	ORS IN 12 Addition	CD2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Floring and title if applicable. ND DIRECTORS DELETE TE A	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ent signature required ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) DA	RS AND DIRECTO	ORS IN 12 Addition	CDDE034 (44/00)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE TE A DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) DA	RS AND DIRECTI Change	DRS IN 12 Addition Addition	CD2C034 (44/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE TE A DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) DA	RS AND DIRECTI Change	DRS IN 12 Addition Addition	CD2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 4.4 CITY-S	ent signature required ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) DA	RS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition) CD2E034 (41/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE TE A DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 4.5 NAME 4.5 STREE 4.5 CITY-S 5.1 TITLE	S. ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) DA ADDITIONS/CHANGES TO OFFICEF	RS AND DIRECTO Change	DRS IN 12 Addition Addition	CD2E034 (44/09)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME	ent signature required ET ADDRESS ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) DA	RS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition	CD2C034 (44,000)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.5 NAME 4.5 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE	S. ET ADDRESS ET ADDRESS ST-ZIP	d when reinstating) DA ADDITIONS/CHANGES TO OFFICEF	RS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition	CD2E034 (44/08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.5 TITLE 4.5 NAME 4.5 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.4 CITY-S	S. ET ADDRESS ET ADDRESS ST-ZIP	d when reinstating) DA ADDITIONS/CHANGES TO OFFICEF	Change	DRS IN 12 Addition Addition Addition Addition Addition	CD2E034 (44,08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 5.4 CITY-S	S. ET ADDRESS ET ADDRESS ST-ZIP	d when reinstating) DA ADDITIONS/CHANGES TO OFFICEF	RS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition	(41,08)
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PSD BLANTON, HENRY H 11617 INNFIELDS DRIVE, SUIT	ations of, Section 607.0505, Florint and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	S. ET ADDRESS ET ADDRESS ST-ZIP	d when reinstating) DA ADDITIONS/CHANGES TO OFFICEF	Change	DRS IN 12 Addition Addition Addition Addition Addition	(4)(0)

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.

SIGNATURE:

Henry H. Blant

Henry H. Blanton, President 2/11/99

(813) 920-6602