

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 06, 1999 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999



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

02-06-1999 90018 016 \*\*\*\*150.00

DOCUMENT # 598445

1. Corporation Name  
I 75 / S 80 CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: % PIPER, HAWKINS & GEORGE, 330 SOUTH PINEAPPLE AVENUE, SUITE 106, SARASOTA FL 34236, US  
Mailing Address: % PIPER, HAWKINS & GEORGE, 330 SOUTH PINEAPPLE AVENUE, SUITE 106, SARASOTA FL 34236, US

3. Date Incorporated or Qualified: 12/27/1978  
4. FEI Number: 59-1875950  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax: Yes [ ], No [X]

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: RITCHEY, JAMES, I 75, 1550 RINGLING BLVD, SARASOTA FL 33577

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

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: MEREDITH M LYNN (NOTE: Registered Agent signature required when reinstating) DATE: 1/10/99

Table 12: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include Joseph W. Moore, James F. Nestor, and Meredith M. Lynn.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes checkboxes for Change and 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...

SIGNATURE: MEREDITH M LYNN (REQUIRED) Jan 10, 1999 781-449-1036

CR2E034 (1/198)