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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 299463 (0)

FERO & SONS, INC.

## **FILED** Jan 23 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address							
20497 E PENNSYLVANIA AVE 20497 E PENNSYLVAN			AVE				
P.O. BOX 299		P.O. BOX 299				DO NOT WRITE IN THIS SPACE	
DUNNELLON	FL 34430	Dunnellon Fl 34430 Us				3. Date Incorporated or Qualified	٦
US US						12/07/1965	1
2 Principal S	face of Business	2a. Mailing Address				4. FEI Number Applied For	┨
2. Principal Place of Business		26 Naming Address				59-1114439 Not Applicable	Η.
Suite, Apt. #, etc.		Suite, Apt. #, etc.				S8 75 Additional	٦
22		27				5. Certificate of Status Desired Fee Required	1
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	~
23		28				Trust Fund Contribution	
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid the current year Intangible	٦
24	25	29	30			Personal Property Tax due June 30. Yes No	╛
<del>'</del> -	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent	]
AN	DREW J. FERO			81	Name		
	497 E PENNSYLVANIA AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	$\dashv$
	NNELLON FL 34432				Ou cot made	areas (1.10. Bare restrict resolution)	
-				83			1
				84	Cit.	85 Zip Code	┥
						FL	1
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the a	bove	-named corp	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	٦
office or i	registered agent, or both, in the State of	of Florida, Such change was tions of Section 607,0505, F	authorize Iorida Sta	ed by	the corporal	ation's board of directors. I hereby accept the appointment as registered	
		10 And	0.0	$\overline{}$	JE	ero	
SIGNATURE	Signature, typed or printed name of registered agen				nt signature requi	ulred when reinstating) DATE	J۱
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	4
TITLE	V	☐ DELETE	111	MLE	1	Change Addition	
NAME	FERO, ORLANDO J. JR.		1.2 N	IAME			- ;
STREET ADDRESS	s 20497 E PENNSYLVANIA AVENUE			1.3 STREET ADDRESS			
CITY-ST-ZIP	DUNNELLON FL		1.4 0	TY-S	T-ZIP		_[]
TITLE	PD	■ DELETE	2.1 T	ILFE		Change Addition	۱'
NAME	FERO, ANDREW J.		2.2 N	IAME	}		1
STREET ADORESS	20497 E PENNSYLVANIA AVENUE			2.3 STREET ADDRESS			1
CITY-ST-ZIP	DUNNELLON FL		2.41	CITY-S	IT-ZIP		╛
TITLE	ST	DELETE	3.1 T	ITLE		Change Addition	1
NAME	FERO, ORLANDO J. SR.		3,2 N	IAME	1		
STREET ADDRESS	20497 E PENNSYLVANIA AVEI	NUE	3.3 S	TREET	ADDRESS		-
CITY - ST - ZIP	DUNNELLON FL			CITY-S	IT-ZIP		╛
TITLE		DELETÉ	4.1 T	TLE		Change	1
NAME			4, 21	NAME			
STREET ADDRESS			4.3 9	TREET	ADDRESS		
CITY-ST-ZIP		···	4,4 0	ITY-S	T-ZIP		_
TITLE		☐ DELETE	5.1 T	TILE		Change Addition	
NAME			5.2 N	IAME			
STREET ADDRESS			5.3 9	STREET	ADDRESS		
CITY-ST-ZIP			5,40	CITY-S	T- ZIP		╛
TITLE		DELETE	6.1 T	TILE		Change Addition	ı
NAME			6.2 N	IAME			
STREET ADDRESS			6.3 8	STREET	ADDRESS		
CITY-ST-ZIP				CITY-S			╛
	100 - all 1 - 4 10	وبالأمريم فمح حججات حمثانة منطه ما	for the ou	amni	tion stated in	in Section 119 07/3Vi) Florida Statutes, I further certify that the information	

pes not quality for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information it is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in