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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 400039



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90021 019 ***150.00

RICHBU	RG & SONS, INC.							
Principal Plac	e of Business	Mailing Address			T (SOUTH BIRTH ONLY DELIN DE LA CITA	4811 BIBN 1 8811 818 1		D): 91311 1821
2250 B HIGHWAY 98 2250 B HIGHWAY 98 MARY ESTHER FL 32569 US US					DO NOT WRITE IN THIS SPACE			
•					3. Date Incorporated or Qualifed			}
					04/26/1972			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	L	_ ::	lied For
21		26			59-1437548			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	1 1 7 -	\$8.75 Additional Fee Required		
. City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution	1 1 *	5.00 i	May Be Fees
Zip 24	Country 25	Zip 29	Country 30	у	This corporation owes the current Personal Property Tax.	it year tntangible ☐ Ye		□No
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Re	gistered Agent		
	IBUDA ALIABIEA D		81	Name				
RICHBURG, CHARLES B 443 SANDY RIDGE CIR.			82	Street Ad	dress (P.O. Box Number is Not Acceptable	le)		~
	RY ESTHER FL 32569		83	 				
			84	City		85	Zip C	ode
					rporation submits this statement for the pu	FL 👸		
SIGNATURE	Signature, typed or printed name of registered age	ID DIRECTORS	Registered Age	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFI			
TITLE	PD	☐ DELETE 1.1 TI		}		□c	hange	☐ Addition
NAME	RICHBURG,PETE		1.2 NAME					
STREET ADDRESS	443 SANDY RIDGE CIRCLE		1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	MARY ESTHER FL		1.4 CITY-	ST-ZIP				C tarres
ΠTLE	SD	☐ DELETE	2.1 TITLE	-		C	nange	Addition
NAME	RICHBURG, PATRICIA L		2.2 NAME					ì
STREET ADDRESS	1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	ET ADDRESS				
CITY+ST-ZIP	MARY ESTHER FL	□ SCI PTE	2. 4 CITY-				hange	Addition
TITLE	V SIGNATURA CITARILES D	DELÉTE	3.1 TITLE	ł			go	L., 1,00,00011
NAME	RICHBURG, CHARLES B.		3.2 NAME	ſ		·~		
STREET ADDRESS				ET ADDRESS	*			
CITY-ST-ZIP	MARY ESTHER FL	DELETE	3.4. CITY- 4.1 TITLE	SI-ZIP		ПС	hange	☐ Addition
TITLE NAME	T RICHBURG, PETER J		4. 2 NAME	.		_	•	
STREET ADDRESS				ET ADDRESS				
	MARY ESTHER FL		4.4 CITY-			•		
TITLE	WENT ESTIMATE	☐ DELETE	5.1 TITLE				hange	Addition
NAME		_	5.2 NAME	1				
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIP	}		5.4 CITY-	ST-ZiP				
TITLE		☐ DELETE	6.1 TITLE				hange	Addition
NAME			6.2 NAME				•	
			6.3 STREE	ET ADDRESS				

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 12 or Block 12 or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

IGNATURE: Pale of Patricia L. Richburg 4/1/99 (850) 581-536