Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90003 024 ***300.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 608294

1. Corporation Name

UNI-GLIDE TRAILER COMPANY

			_			 	
Principal Place of Business Mailing Address					I IBBING STATE STATE AND A STATE OF THE STAT		#1#11 01 #11 1##1
155 CENTER COURT		155 CENTER COURT					
VENICE FL 34292		VENICE FL 34292		DO NOT WRITE IN TH	S SPACE		
US		US			3. Date Incorporated or Qualifed	O OI AOL	
					01/29/1979		
2 Principal P	tace of Business	2a, Mailing Address	- ·		4. FEI Number	I A	prilled For
— ·	lace of Busiliess	26			59-1880042		ot Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					A iditional
22		27		5. Certifcate of Status Desired		equired	
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution		tc Fees
Zip	Cour try	Zip	Country		8. This corporation owes the current year	ntangible	
24	25	29 30]		Persor al Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent	
			81	Name			į
	S, ROBERT W.		82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
	SANDY COURT		52	Cuborna			
VEN	ICE FL 34292		83	,			
			84	City	F	85 Zip	Code
·				<u> </u>	rporation submits this statement for the purpose	_ ,	giotorod
office or r	egistered agent, or bo'h, in the State on mailiar with, and accept the obligat	of Florida. Such change was autho i ons of, Section 607.0505, Florida	orized by Statutes	the corpora	tion's board of cirectors. I hereby accept the app	ointment as re	egistered
12.	Signature, typed or printed nai ne of registered agen OFFICERS ANI	, , , , , , , , , , , , , , , , , , , ,	13.	- signature requ	ADDITICNS/CHANGES TO OFFICERS	ND DIRECTO	OF:S IN 12
TITLE	P	☐ DELETE	1.1 TITLE		NOTIN HOLD WISE TO STREET	Change	Addition
NAME	DILLS, ROBERT W		1.2 NAME				ļ
STREET ADDRESS	1720 SANDY COURT		1.3 STREET ADDRESS				
	VENICE, FL 00000		1.4 CITY-S	ŀ			
CITY-ST-ZIP TITLE	VP	DELETE	2.1 TITLE			Change	Addition
NAME	DILLS, DOUGLAS W.	_	2.2 NAME				1
STREET ADDRESS			2.3 STREET	ADDRESS			Ì
CITY-ST-ZIP	VENUOR EL		2. 4 CITY-S	Į.			}
TITLE	ST	☐ DELETE	3.1 TITLE			Change	Addition
NAME	DILLS, MARTHA C.	_	3.2 NAME				
STREET ADDRESS	1720 SANDY COURT		3.3 STREET	ADDRESS			Į.
CITY-ST-ZIP	VENICE FL		3.4. CITY-S				
TITLE	VERIOR FE	☐ DELETE	41 TITLE			Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				i
CITY-ST-ZIP		i	4.4 CITY-S	J			
TITLE			5.1 TITLE		,	☐ Change	☐ Addition
NAME		DELETE	5.2 NAME				
		☐ DELETE					ļ
SIREE ADDRESS		□ DEFE1E		ADDRESS			
		□ DELE1E	5.2 NAME 5.3 STREET				
CITY-ST-ZIP		DELETE	5.2 NAME			Change	☐ Addition

14. Thereby 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 a nual 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.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP