## 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 # F9400002207 (8)

AKW SYSTEMS, INC.

Principal Place of Business	
RD #9 BOX 217 VALLEY VIEW R YORK PA 17402	0/

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

RD #9 BOX 217 VALLEY VIEW ROAD YORK PA 17402

US

26

## FILED Mar 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

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Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

1/12/98 (717)840-8855

Not Applicable

3. Date Incorporated or Qualified

04/28/1994

23-2465299

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

23						Trust rand Continuation (	Added	to Pees
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid the	current year In	tangible
24	25	29	30			Personal Property Tax due June 30.		] No
	9. Name and Address of Curre	<del></del>		81		10. Name and Address of New Register	ed Agent	
INTERSTATE DOCUMENT FILINGS INCORPORATED					Name			
526 E. PARK AVE., #200 TALLAHASSEE FL 32301-2551			82 Street Address (P.O. Box Number is Not Acceptable)					
	ED 4 1/100EE 1 E 0E00 1 E00 1			83				
	4							
	•			84	City	F	L 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida	Statutes, the	above	e-named cor	poration submits this statement for the purpos	e of changing i	ts registered
office or i	regi <b>stered</b> agent, or both, in the State am <b>fam</b> iliar with, and accept the oblig	∈of Florida, Such change ations of, Section 607.0f	e was authoriz 605. Florida Sta	ed by atutes	the corpora	tion's board of directors. I hereby accept the a	appointment as	registered
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title it applicable.	(NOTE: Register	ed Ago	nt signature requi	red when reinstating) DAT	E	
12.		D DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	1S IN 12
TITLE	CO-P	☐ DELE	TE 1.1	TITLE	(	Co-President	Change	Addition
NAME	WALTER, KEITH A		1.21	NAME		Keith A. Walter		
STREET ADDRESS	2449 HARTFORD ROAD		1.3 3	STREET		420 Hidden Hill Farm Lane	<u> </u>	
CITY-ST-ZIP	YORK PA 17402		1.41	CITY-S	T-ZIP	Jacobus, PA 17407		
TATLE	CO-P	DELE	TE 2.1	TITLE			Change	☐ Addition
NAME	WAITE, ADAM J		2.21	VAME				
STREET ADDRESS	3699 SORREL RIDGE LANE		2.3 9	STREET	ADDRESS			1
CITY-ST-ZIP	YORK PA 17402		2.4	CITY - S	IT-ZIP	•		Ĩ
TITLE	ST	☐ DELE	TE 3.1	TITLE			☐ Change	Addition
NAME	WALTER, DAVID A		3.21	NAME				
STREET ADDRESS	3035 PERSIMMON DRIVE		3.3 5	STREET	ADDRESS			
CITY-ST-ZIP	YORK PA 17402		3.4.	CITY-S	T- ZIP			Ì
TITLE		DELE	TE 4.1 1	TITLE	1		Change Change	Addition
NAME			4.2	NAME	-			
STREET ADDRESS			4.3 9	STREET	ADDRESS			
CITY-ST-ZIP			4.41	CITY-S	r-zip			ì
TITLE		DELE		ITLE			Change	Addition
NAME			5.21	IAME				
STREET ADDRESS			5.3 9	STREET	ADDRESS .			
CITY-ST-ZIP				CITY-S1	i			]
TITLE	<del></del>	☐ DELE		ITLE		<del></del>	☐ Change	☐ Addition
NAME			6.2	AME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-S1	1			
14. I hereby o	pertify that the information supplied w	ith this filing does not at	alify for the ex	empt	ion stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	Information
indicated officer or Block 12	on this annual report or supplementa director of the corporation or the read or Block 13 if changed, or on an atta	il annual report is true ar piver or trustee empower chrijent with an address	nd accurate ar red to execute	nd tha this r	it my signatu eport as req	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	under oath; tha at my name app	at I am an pears in

David A. Walter, Sec./Treas