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

1	MENT # K577 Er Brush, Inc.	(9)			II AN ANN ANN ANN ANN ANN ANN
2500 MINNESOTA AVENUE P. O. BOX 19 LYNN HAVEN FL 32444		Mailing Address			
		P. O. BOX 15895 PANAMA CITY FL 32406 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/09/1988	
2. Principal Place of Business 2a. Mailing Ad			· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21		26		59-2924594	Not Applicable
Sulle, Apt. #, etc.		Suite, Apt. #, etc. 27 City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution B. This corporation owes or has paid the	Added to Fees
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cu	_		10. Name and Address of New Registers	
11, Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607 egistered agent or 50 to in the sem familiar will, and accept the second sections of ogether		es, the above-named corpulnorized by the corporal prida Statutes. Albert J. S. T. Fogrishred Agent signature required.	tion's board of directors. I hereby accept the a	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD STOPKA, ALBERT J., JR. 2500 MINNESOTA AVENU LYNN HAVEN FL		1.2 NAME 1.3 Streft address 1.4 City - St - Zip	ΤЪ	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ALBERT J. STOPKA, III 220 MCKENZIE AVENUE PANAMA CITY FL	☐ DELETE	O D CTREET ADODECC	lbert J. Stocka, III DO7 Jenks Avenue anama City, FL 32401	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STOPKA, BRIAN 2500 MINNESOT LYNN HAVEN,	A AVENUE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	topka, Brian J., Sr. 500 Minnesota Avenue Junn Haven, FL 32444	Change Addition
TITLE NAME STREET ADDRESS	S. Harris	☐ DELETE		ancy M. Stopka. 500 Minnesota Avenue	Change Addition

14. Thereby certify that the information supplied with this filling 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 13 if changed, or or an attrohment with an agores.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

NAME

DELETE

DELETE

Albert J. Stockatt 1/21/98

Lynn Haven, FL 32444

Change

Change

Addition

Addition

FILED

Jan 28 1998 8:00am

Secretary of State