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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400082589 (0)

**OSPREY TOOL INCORPORATED** 

## FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 13761 LINDEN DR., SUITE D 13761 LINDEN DR., SUITE D SPRING HILL FL 34609 SPRING HILL FL 34609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/10/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21262 Moore Rd 59-3276892 Not Applicable 21262 Moace Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing BROOKE VEL Bucockson 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Heary odc JH60A Yes 30 H4804 06 0 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TAYLOR, JAMES 21262 MOORE RD 82 Street Address (P.O. Box Number is Not Acceptable) 83 **BROOKSVILLE FL 34609** 84 City 85 Zip Code FL 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) anie of rogistifiyt agent as titile Carprise OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETÉ Change TITLE 1.1 TITLE Addition NICOLA, JOHN MAME 1.2 NAME 1021 26th ST. NO. 12171 OAVERN ROAD~ STREET ADDRESS 1.3 STREET ADDRESS **SPRING HILL FL 34609** CITY-ST-ZIP 1.4 CITY - ST - ZIP ST Petresbuca てしる DELETE Change Addition TITLE 2.1 TITLE TAYLOR, JAMES NAME 21262 MOORE RD. STREET ADDRESS 2.3 STREET ADDRESS **BROOKSVILLE FL 34609** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

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 Statules. 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 on an attachment with an address.