PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V36490**

1. Corporation Name

FILED Apr 01, 1999 8:00 am Secretary of State 04-01-1999 90033 041 ***150.00

	N L. DANIEL, INC.							
Principal Place	e of Business	Mailing Address			[
P.O. BOX 1972		P.O. BOX 1972						
CLEWISTON FL 33440 CLEWISTON FL 33440					DO NOT WOIT	TALTUIC COA	^E	
					DO NOT WRITE	IN THIS SPA	JE .	
					 Date Incorporated or Qualifed 05/14/1992 			
2 Principal D	lace of Business	2a. Mailing Address			4. FEI Number		Appl	lied For
	ace of Dusifiess	26			65-0353302			Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			•	<u> </u>	3.75 Ad	
22		27			5. Certifcate of Status Desired		Fee Req	
City & State	e	City & State			6. Election Campaign Financing	<u>~ '\$</u>	5.00 M	lav Be
23		28			Trust Fund Contribution		Added to	
Zip	Country	Zip	Coun	try	8. This corporation owes the curren	nt year Intangjb	le	_ }
24	25	29	30		Personal Property Tax.]X [Y	es [No
	9. Name and Address of Curre	nt Registered Agent	<u> </u>		10. Name and Address of New Re	gistered Agen	t	
		,	1	81 Name				
	PHEN, DANIEL L		- -	32 Street	Address (P.O. Box Number is Not Acceptab	le)		
804 North Berner Rd.			`	00000				
CLE	WISTON FL 33440		1	B3				
				B4 City		85	Zip Ço	nde ·
			ļ		•	FL ([,	
-60	registered agent, or both, in the State im familiar with, and accept the obligation .	of Florida. Such change was ations of, Section 607.0505, F	s authorized i Florida Statut	es.	corporation submits this statement for the poration's board of directors. I hereby accept		nt as regi	stered
	Signature, typed or printed name of registered age			gent signature r	equired when reinstating)	DATE AND D	DECTOR	O IN 42
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		KECION	(O) 1 2
TITLE	D		4.4 7/11	_		· · · □ (Change	
NAME	DANIEL OTERUENI	□ becele	1,1 TITL			.` 🗆	Change	☐ Addition
	DANIEL, STEPHEN L.	. DELETE	12 NAW	Æ		· , □ (Change	
STREET ADDRESS	804 N BERNER RD	. Detele	1.3 STR	EET ADDRESS		·} 🗀 (Change	
CITY-ST-ZIP	804 N BERNER RD CLEWISTON FL		1.2 NAM 1.3 STR 1.4 CITY	NE EET ADDRESS /-ST-ZIP	-	, <u> </u>		☐ Addition
	804 N BERNER RD CLEWISTON FL D	DELETE	1.2 NAM 1.3 STR 1.4 CITA 2.1 TITL	EET ADDRESS /-ST-ZIP		, <u> </u>	Change Change	
CITY-ST-ZIP	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH		1.2 NAV 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAV	EET ADDRESS /-ST-ZIP E		, <u> </u>		☐ Addition
CITY-ST-ZIP TITLE	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD		1.2 NAV 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAV	EET ADDRESS /-ST-ZIP		, <u> </u>		☐ Addition
CITY-ST-ZIP TITLE NAME	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH	☐ DELETE	12 NAW 1.3 STR 1.4 CITA 2.1 TITL 2.2 NAW 2.3 STR 2.4 CIT	ME EET ADDRESS /-ST-ZIP E ME EET ADORESS Y-ST-ZIP			Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD		1.2 NAW 1.3 STR 1.4 CITA 2.1 TITL 2.2 NAW 2.3 STR 2.4 CIT 3.1 TITL	EET ADDRESS /-ST-ZIP E ME EET ADORESS Y-ST-ZIP E				☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	☐ DELETE	1.2 NAW 1.3 STR 1.4 CITI 2.1 TITI 2.2 NAW 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAW	AE EET ADDRESS 7-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE			Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	☐ DELETE	12 NAM 1.3 STR 1.4 C(T) 2.1 TITL 2.2 NAM 2.3 STR 2.4 C(T) 3.1 TITL 3.2 NAM 3.3 STR	EET ADDRESS 7-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME ME ME ME ME ME ME ME ME			Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	☐ DELETE	1.2 NAM 1.3 STR 1.4 CITA 2.1 TITA 2.2 NAM 2.3 STR 2.4 CIT 3.2 NAM 3.3 STR 3.4 CIT	ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME M			Change Change	Addition Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	DELETE	12 NAW 1.3 STR 1.4 CTD 2.1 TITL 22 NAW 2.3 STR 2.4 CTT 3.1 TITL 3.2 NAW 3.3 STR 3.4 CTT 4.1 TITL 4.2 NAW 4.3 STR 4.4 CTD 5.1 TITL 5.2 NAW	ME EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E		·	Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	DELETE	12 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR	ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS		·	Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	DELETE	12 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 5.5 STR 5.4 CITY 5.5 CITY 5.	ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS (-ST-ZIP) E ME			Change Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	804 N BERNER RD CLEWISTON FL D DANIEL, DEBORAH 804 N BERNER RD	DELETE	12 NAM 1.3 STR 1.4 CITY 2.1 TITL 22 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.7 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL 6.1 TI	ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS (-ST-ZIP) E ME EET ADDRESS (-ST-ZIP) E			Change Change	Addition Addition Addition
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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 section 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 a attachment with an address, with all other like empowered.

SIGNATURE: