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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 632583

1. Corporation Name

PENCE SOUTH BREVARD SEWER & SEPTIC TANKS, INC.

Principal Place of Business • Mailing Address							•••
3115 DIXIE HWY NE PO BOX 060101							
PALM BAY FL 32905 PALM BAY FL 32906-0101					DO NOT WRITE IN THIS	CDACE	
US US					3. Date Incorporated or Qualifed	SPACE	
					08/13/1979		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ar	pplied For
21		26			59-1946135		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27		3. Octobro di Cialdo Dobrico	Fee Re	equired	
City & State		City & State			 \$5.00	May Be⊶	
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country		ountry		8. This corporation owes the current year In		_
24	25	29 30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered	Agent	
551	OF BOY		81	Name			
PENCE, ROY			82	Street Ac	Idress (P.O. Box Number is Not Acceptable)		
	5 DIXIE HIGHWAY, N.E.						
PAL	M BAY 32905		83				4
			84	City	FL	85 Zip	Code
				L	propration submits this statement for the purpose or	<u>- </u>	
office or o	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was authoriz	ed by	the corpora	ation's board of directors. I hereby accept the appo	intment as re	egistered
SIGNATURE	Signature, typed or printed name of registered agen-	t and title if applicable. (NOTE: Registe	red Ager	nt signature requ	dred when reinstating) DATE		
12.	OFFICERS AN		3		ADDITIONS/CHANGES TO OFFICERS A		
TMLE	PD ·	☐ DELETE 1.	TITLE			☐ Change	☐ Addition
NAME	PENCE, HERSCHELL	1.3	NAME				
STREET ADDRESS	3115 DIXIE HWY NE	1.3	STREE	TADDRESS			
CITY-ST-ZIP	PALM BAY FL 1.4 C		CITY-S	T-ZIP			
TITLE	STD □ DELETE 2.1 T		TITLE			☐ Change	☐ Addition
NAME	PENCE, ALENE	2.	NAME				1
STREET ADDRESS	3115 DIXIE HWY NE	2:	STREE	ADDRESS			İ
CITY-ST-ZIP	PALM BAY FL	2.	4 CITY-S	iT-ZIP			\
TITLE			TITLE			☐ Change	Addition
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STREET ADDRESS	3115 DIXIE HWY NE	3:	STREE	ADDRESS			1
	PALM BAY FL		I, CITY-S		-		
CITY-ST-ZIP TITLE			TITLE	31-2IF		☐ Change	☐ Addition
		_	2 NAME				
NAME							
STREET ADDRESS	•			F ADDRESS)
CITY-ST-ZIP			CITY-S	I-ZIP		☐ Change	Addition
TITLE	•		I TITLE				
NAME			NAME				İ
STREET ADDRESS	·			TADDRESS			}
CITY-ST-ZIP			CITY-S	I-ZIP			
TITLE		C Decert	TITLE	.]		Change	☐ Addition
NAME		6.3	NAME	ì			

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 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

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

723-6107