## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 121396

(6)

SETZER LUMBER COMPANY

		Madison	A mining	

## **FILED** Sep 03 1997 8:00am Secretary of State



Principal Place	e or <b>Bu</b> siness	Mailing Adoress								
818 BAYSIDE DR. TAMPA FL 33609		818 BAYSIDE DR. Tampa FL 33609-36	818 BAYSIDE DR. TAMPA FL 33609-3618							
						3. Date Incorporated or Qualified 12/23/1929	3a. Date of Last Report 02/12/1996			
<del>_</del>	ace of Business	2a. Mailing Addres	2a. Malling Address			4. FEI Number	1		Applied	
21		26				<b>59-0442480</b> Not Applica				
Suite, Apt. #. etc.		<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Addit	
22 City 8 City		City & State	City & State			<del>                                     </del>			e Require	
City & State		<u>+</u>	¬ '		6. Election Campaign Financing	\$5.00 May Be Added to Fees				
<b>23</b> Zip	Country	[28] Zip	4 · · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution					
24	25	29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
<u></u>	9. Name and Address of Curi			1		10. Name and Address of New Reg				
SET2	ZER,JOHN D	F C. LA IN THE NAME OF COLUMN CASES CANCELLED F		81	Name					
	BAYSIDE DR			82	Stroot Add	ress (P.O. Box Number is Not Acceptabl	٥)			$\longrightarrow$
	PA FL 33609			102	Sileet Add	ress (F.O. Box Number is Not Acceptable	<del>e</del> )			
				83						
				84	City	· · · · · · · · · · · · · · · · · · ·		loc	Zip Code	
				04	City		FL	85	zip Couc	'
11. Pursuant t	o the provisions of Sections 607.0	502 and 607.1508, Florida	Statutes, the a	above	named cor	poration submits this statement for the pu	rpose of	changi	ng its reg	jistered
office or re agent. I ar	egistered agent, or both, in the Sta In familiar with, and accept the ob-	ate of Florida. Such change ligations of, Section 607.05	i was authorize 05, Florida Sta	ed by atutes	the corpora	poration submits this statement for the pution's board of directors. I hereby accept	the appo	iintmer	it as regis	stered
SIGNATURE										1
	Signature, typod or printed name of registered				uper erulangia fi	red when reinstating)	DATE			
12.	STD OF FICERS A	AND DIRECTORS DELE	13.			ADDITIONS/CHANGES TO OFFICE				(
TITLE	SETZER, A T	L) Dette				·		Cha	ige [	Addition
NAME	818 BAYSIDE DR		1	NAME						
STREET ADDRESS	TAMPA, FL 00000				ADDRESS					Į.
CITY-ST-ZIP TITLE	PD	DELE		011Y-\$1	- ZIP			Cha	200	Addition
NAME	SETZER, JOHN D	L) blec		NAME				Chai	ige L	, Audition
STREET ADDRESS	818 BAYSIDE DR				ADDRESS					
	TAMPA, FL 00000			CITY-S.						1
CITY-ST-ZIP TITLE	VD	DELE			1-211			Cha	nne	Addition
NAME	HANEY, RETA M.	<u></u>		NAME					,g~	
STREET ADDRESS	5921 LYNN ROAD				ADDRESS					- 1
CITY-ST-ZIP	TAMPA FL			CHY-S'	- 1					ŀ
TITLE		DELF				· · · · · · · · · · · · · · · · · · ·		Chai	nge 🔲	Addition
NAME				NAME				-		
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				CITY-ST						
TITLE		D£LE		ITLE				Chai	nge 🔲	Addition
NAME	e			NAME	1					
STREET ADDRESS			535	STREET A	LODRESS					
CITY-ST-ZIP				CITY-ST	i	•				
TITLE	<del></del>	☐ DELF						Chai	ige 🔲	Addition
NAME			621	NAME						
STREET ADDRESS			635	STREET #	DDRESS					
CITY-ST-ZIP				CITY-ST						

14. I do 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 eath; 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.