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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90053 029 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 125426

J.W. APPLEY AND SON INCORPORATED

Principal Plac	e of Business	Mailing Address			T LANGUAS TEMENT TIRM METER REMEN TEREN MEST ANDRE	. 41411 81811 81811	81811 B1811 1881
13215 38TH ST	N	13215 38TH ST N					
CLEARWATER FL 33762 CLEARWATER FL 33762							
US		US			DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualifed		
					10/31/1931		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	⊢	pplied For
21		26			59-0145430		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional
22 27							equired
City & State		City & State			6. Election Campaign Financing		May Be
23		28	Country		Trust Fund Contribution		to Fees
Zip	Country	—			8. This corporation owes the current year I	ntangible Yes	□No
24					Personal Property Tax. 10. Name and Address of New Registere		
	9. Name and Address of C	urrent Registered Agent	81	Name	10. Name and Address of New Registere	a Agent	
ADD	EV INHNE		01	Name			
APPLEY, JOHN E 13215 38TH ST N			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	ARWATER FL 33520			ļ	<u> </u>	<u> </u>	2 1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
OLE	ANWAIEN FL 33320		83	'		Middle B.	孙 孙 强
			84	City		85 Zip	Códe
				' '	F	LII	
.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	,						
SIGNATURE	Signature, typed or printed name of register	red agent and title if applicable. (NOTE	: Registered Age	nt signature requi	red when reinstating) DATE		
12.	OFFICER	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition
NAME	appley, John E.		1.2 NAME				
STREET ADDRESS	13215 38TH ST.N.		1.3 STREE	TADDRESS			
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-S	ST-ZIP			·
TITLE	S	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	APPLEY BETTY A		2.2 NAME				
STREET ADDRESS	13215 38TH ST.N.		2.3 STREE	TADDRESS			
CITY-ST-ZIP	0. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		2. 4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			election was
CITY-ST-ZIP	Fresh and the		3.4. CITY- 5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			
		•	4.4 CITY-S				
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	5,1 TITLE	n-AIF		Change	Addition
			5.2 NAME				
NAME OTDEET ADDOESS				TADDRESS			
STREET ADDRESS			5.4 CITY-S				
CITY-ST-ZIP	20	DELETE	6.1 TITLE	,, 41		Change	Addition
TITLE	19 (2 to 12	C1 DETELE	6.2 NAME			onlarige	
NAME				T ADDRESS			
CEDEET ADDOCCO			■ U.J SIREE	LADDUCCOOL			

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.

6.4 CITY-ST-ZIP

SIGNATURE: