

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90136 022 ***150.00

DOCUMENT # 134345

1. Corporation Name

SWINDAL-POWELL COMPANY

Principal Place of Business

7750 PHILLIPS HIGHWAY
P.O. BOX 24428
JACKSONVILLE FL 32241-1428

Mailing Address

7750 PHILLIPS HIGHWAY
P.O. BOX 24428
JACKSONVILLE FL 32241-1428

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1937

4. FEI Number

59-0473160

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**SWINDAL, MICHAEL P.
7500 PHILLIPS HIGHWAY
JACKSONVILLE FL 32217**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	BOARD OF DIRECTOR
NAME	COOK, DAVID F	1.2 NAME	NANCY W. POSNER
STREET ADDRESS	7750 PHILLIPS HIGHWAY	1.3 STREET ADDRESS	7750 PHILLIPS HIGHWAY
CITY-ST-ZIP	JACKSONVILLE, FL 0	1.4 CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	P	2.1 TITLE	
NAME	SWINDAL, MICHAEL P.	2.2 NAME	
STREET ADDRESS	7750 PHILLIPS HIGHWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	
TITLE	C	3.1 TITLE	
NAME	WAINWRIGHT, ROBERT P SR	3.2 NAME	
STREET ADDRESS	7750 PHILLIPS HIGHWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE, FL 0	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	WAINWRIGHT, ROBERT P JR	4.2 NAME	
STREET ADDRESS	7750 PHILLIPS HWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	JAX FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	
NAME	SWINDAL, KENNETH O.	5.2 NAME	
STREET ADDRESS	1777 N.W. 72ND AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	
NAME	SWINDAL, J F III	6.2 NAME	
STREET ADDRESS	1777 NW 72ND AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	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 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 another like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99

Date

904-739-0100

Daytime Phone #

CR2E034 (1/98)