

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Jul 29 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 199818 (6)
 1. Corporation Name
PRECISION PLASTICS INC



Principal Place of Business: 1415 EAST BAY DR. LARGO FL 33771-1012 US
 Mailing Address: 1415 EAST BAY DR. LARGO FL 34641

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/08/1957

4. FEI Number: 59-0798041 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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country

2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
LEMASTER, WILLIAM H
1872 CAMEO WAY
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code: FL 33756

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: *William H. Lemaster, Pres.* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	LEMASTER, WILLIAM H	
STREET ADDRESS	1872 CAMEO WAY	
CITY-ST-ZIP	CLEARWATER FL 34616	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	BUFFINGTON, BARBARA J.	
STREET ADDRESS	4052 HARBOR HILLS DR.	
CITY-ST-ZIP	LARGO FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	LEMASTER, WILLIAM H.	
STREET ADDRESS	1872 CAMEO WAY	
CITY-ST-ZIP	CLEARWATER FL 34616	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	33756
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	VS JERRY N. SPAULDING
2.3 STREET ADDRESS	2169 WATERSIDE DRIVE
2.4 CITY-ST-ZIP	CLEARWATER, FL 33764
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	33756
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	400002604734
5.3 STREET ADDRESS	-07/31/98--01103--030
5.4 CITY-ST-ZIP	***150.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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

SIGNATURE: *William H. Lemaster*

CR2E034 (5/98)

Pyd

July 8, 1998

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500


Re: Precision Plastics, Inc. 1998 Annual Report

Dear Sirs:

The corporation did not receive the original report for filing. Therefore, we request that the \$400 penalty be waived. We have enclosed a \$150 check for the annual filing.

Sincerely,

PRECISION PLASTICS, INC.


Jerry N. Spaulding
Vice President

JNS:pas
Enclosures