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

PROFIT CORPORATION ANNUAL REPORT

1999

WARZECHA, GENE

LARGO FL 33773

11311 CONCEPT BOULEVARD



9. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90151 033 ***158.75

OCUMENT #	275256
LINVATED CORPORA	MOIT

rincipal Place of Business	Mailing Address				
311 CONCEPT BLVD. RGO FL 33773 S	11311 CONCEPT BLVD. LARGO FL 33773 US	DO NOT WRITE IN THIS SPACE			
		3. Date Incorporated or Qualifed 10/31/1963			
. Principal Place of Business	2a. Mailing Address 26	4. FEI Number 59-1086703			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired 🕱 \$8.7			
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution Add			
Zip Country	Zip Country	8. This corporation owes the current year Intangible			

	10/01/1000				
	4. FEI Number			Applied For	
	59-1086703			Not Applicable	
	5. Certifcate of Status Desired	X		Additional Required	
	Election Campaign Financing Trust Fund Contribution			May Be d to Fees	
	8. This corporation owes the curr	ent year I	ntangible		
	Personal Property Tax.	•	☐Yes	□No	
	10. Name and Address of New F	Registere	d Agent		
Name					
Street Add	ress (P.O. Box Number is Not Accepta	ible)			
City			leel 7:		

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

82

83

agont, re	in isininai wiai, and accept the obligations	oi, section 607.0505, Fioi	ida Statutes.					
IGNATURE								
	Signature, typed or printed name of registered agent and		Registered Agent signature required	f when reinstating)	DATE			
·	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	DIRECTORS IN 12	
LE	Р	□ DELETE	1.1 TITLE	<u></u>		☐ Change	Addition	
ΛE	GROSS, JOSEPH B		1.2 NAME					
REET ADDRESS	· - · · -		1.3 STREET ADDRESS		•			
Y-ST-ZIP	LARGO FL 33773		1.4 CITY-ST-ZIP					
E	V	☐ DELETE	2.1 TITLE			Change	Addition	
ME	Corasanti, Joseph		2.2 NAME					
REET ADDRESS	310 BROAD STREET		2.3 STREET ADDRESS					
Y-ST-ZIP	UTICA NY 13501		2.4 CITY-ST-ZIP	·	• ••			
E	V	☐ DELETE	3.1 TITLE			Change	Addition	
ИE	EADDY, JOSEPH		3.2 NAME					
REET ADDRESS	11311 CONCEPT BLVD.		3.3 STREET ADDRESS	•				
Y-ST-ZIP	LARGO FL 33773		3.4. CITY-ST-ZIP					
.E	S	☐ DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	-	Change	Addition	
AE	ACEY, THOMAS		4. 2 NAME			- onange		
REET ADDRESS	310 BROAD STREET		4.3 STREET ADDRESS					
r-ST-ZIP	UTICA NY 13501		4.4 CITY-ST-ZIP					
Ε	AS	☐ DELETE	5.1 TITLE			Change	Addition	
Æ	WARZECHA, GENE		5.2 NAME			Change	☐ Addition	
EET ADDRESS	11311 CONCEPT BLVD.		5.3 STREET ADDRESS					
/-ST-ZIP	LARGO FL 33773		5.4 CITY-ST-ZIP					
E .		☐ DELETE	6.1 TITLE			Channe	C Addition	
Æ			6.2 NAME		•	☐ Change	Addition	
EET ADDRESS			6.3 STREET ADDRESS					
-ST-ZIP								
-31-ZIF			6.4 CITY-ST-ZIP				,	

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.

IGNATURE:

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TANUARY 15, 1999 717-199-5295
Date Daytime Phone #