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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 279483

C.J. PETTERS & SONS, INC.

Principal Place of Business		Mailing Address				L LONGS OF LIGHT CANDIN CANDIN PRINCE SECOND THIN SEC	III BIBII BIBII BIBII		
31448 ST. JOE ROAD DADE CITY FL 33525		31448 ST. JOE RD DADE CITY FL 33525	31448 ST. JOE RD DADE CITY FL 33525					-	
US		US				DO NOT WRITE IN TH	IIS SPACE		_
						3. Date Incorporated or Qualifed 03/13/1964			
2 Principal F	Place of Business	2a. Mailing Address				4, FEI Number		plied For	┨
21	idoo or Basilloss	26				59-1038973		ot Applicable	1
Suite, Apt.	. #. etc.	Suite, Apt. #, etc.				33 1000313		Additional	1
22		27				5. Certificate of Status Desired	y	-conicial -حجنcquired	<u> </u> _
City & Sta	te	City & State				6. Election Campaign Financing	\$5.00		1
23		28				Trust Fund Contribution	•	to Fees	١.
Zip	Country	. Zip	Co	untry		8. This corporation owes the current year	Intangible		١.
24	25	29	30			Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Curr	ent Registered Agent	•			10. Name and Address of New Register	d Agent	; • · · · · ·]
	TERM OF ELECTIC			81	Name				
	TERS, CLEMENT E			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			┨
	33 ST JOE RD.			1	Oli Coli / Idai (Construction of the Procedure			ł
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		*		84	City	F	85 Zip (-oue	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, the	above	named corpo	oration submits this statement for the purpose	of changing its	registered	
office or agent. I a	registered agent, or both, in the Stat am familiar with, and accept the obli- Signature, typed or printed name of registered a	te of Florida. Such change was a gations of, Section 607.0505, Flo	uthorize rida Sta : Registere	ed by ti itutes. ed Agent	the corporatio	n's board of directors. I hereby accept the application of the directors o	pointment as re	gistered	
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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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 15, 1999 8:00am

Secretary of State

02-15-1999 90003 039 ***150.00