

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

FILED

Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 313008 (5)

1. Corporation Name

TOWNLEY MANUFACTURING COMPANY, INC.



Principal Place of Business 10251 SE 110TH ST ROAD P O BOX 221 CANDLER FL 32111-0221	Mailing Address 10251 SE 110TH ST ROAD P O BOX 221 CANDLER FL 32111-0221
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/20/1967	Applied For Not Applicable
4. FEI Number 59-1205861	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> 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
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9. Name and Address of Current Registered Agent

TOWNLEY, J.O.
10251 SE 110TH ST ROAD
CANDLER FL 32111

10. Name and Address of New Registered Agent

81 Name JO TOWNLEY, JR	82 Street Address (P.O. Box Number is Not Acceptable) 10551 SE 110TH ST RD	83 City CANDLER, FL 32111	84 State FL	85 Zip Code
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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	VD	1.1 TITLE	
NAME	TOWNLEY, PARNEL	1.2 NAME	
STREET ADDRESS	BELVIEW-CANDLER RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	CANDLER, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	1.5 Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	HALL, SARAH T	2.2 NAME	SARAH T. DEAN
STREET ADDRESS	BELVIEW-CANDLER RD	2.3 STREET ADDRESS	PO Box 213 N/A
CITY-ST-ZIP	CANDLER, FL 00000	2.4 CITY-ST-ZIP	CANDLER, FL 32111
TITLE	TD	3.1 TITLE	1.6 Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	TOWNLEY, HELEN	3.2 NAME	HELEN L TOWNLEY
STREET ADDRESS	BELVIEW-CANDLER RD	3.3 STREET ADDRESS	PO Box 221 N/A
CITY-ST-ZIP	CANDLER, FL 00000	3.4 CITY-ST-ZIP	CANDLER, FL 32111
TITLE	CD	4.1 TITLE	1.7 Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	TOWNLEY, J O	4.2 NAME	
STREET ADDRESS	BELVIEW-CANDLER RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	CANDLER, FL 00000	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	1.8 Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	TOWNLEY, J O, JR	5.2 NAME	
STREET ADDRESS	BELVIEW-CANDLER RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	CANDLER, FL 00000	5.4 CITY-ST-ZIP	
TITLE	VD	6.1 TITLE	1.9 Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	TOWNLEY, TIMOTHY	6.2 NAME	
STREET ADDRESS	BELVIEW-CANDLER RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	CANDLER, FL 00000	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)(c), 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 in an attachment with an address.

SIGNATURE: *SARAH T. DEAN* 1-13-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0027032

CR2E034 (10/97)