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

DOCUMENT # 344395

AMICK & SON INC

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90109 009 ***150.00



	•							
Principal Place of Business Mailing Address					4 (SEIDE HILL BIRIT ATDON HILL IS	(B)	111 81811 B1	All Atalt andur reat
1200 4TH ST N ST PETERSBURG FL 33701 1200 4TH ST N ST PETERSBURG FL 33701								
					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					04/11/1969			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			59-1259591			Not Applicable
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		• -	5 Additional Required
City & State City & Sta		City & State	State		6. Election Campaign Financing \$5.00 May Be			
23		28		.	Trust Fund Contribution			ed to Fees
Zip	Country .	Zip	Coun	try	8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No			
24	25 Cum	29	30 =		Personal Property Tax. Y Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curr	rent Registered Agent		31 Name	to. Name and Address of New P	egistered /	-tgeni	
AMICK, PHILIP B. J								
6145 4TH AVE., N.			[1	82 Street Address (P.O. Box Number is Not Acceptable)				
ST. PETERSBURG FL 33710			1	33				
• • • • • • • • • • • • • • • • • • • •								
				34 City		FL	85 2	ip Code
11 Dureuant	to the provisions of Sections 607.0	1502 and 607 1508. Florida Sta	tutes, the ab	ve-named cor	poration submits this statement for the	nurnose of o	changing	its registered
office or re	egistered agent, or both, in the Sta n familiar with, and accept the obli	ite of Florida. Such change was	s autnorized	by the corporat	tion's board of directors. I hereby accep	t the appoin	itment as	s registered
SIGNATURE					red when reinstating)	DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R 12. OFFICERS AND DIRECTORS				gent signature requi	ADDITIONS/CHANGES TO OF		D DIREC	CTORS IN 12
TITLE	STD	DELETE	13.	E	ADDITIONO/OFFICE TO U.		[] Chan	
NAME .	AMICK, PHILIP B. J		1.2 NAA					1
STREET ADDRESS	6145 4TH AVE N			EET ADDRESS				1
CITY-ST-ZIP	ST PETERSBURG, FL 00000	i		-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITL				Chan	ge Addition
NAME	AMICK, PHILIP B. S		2.2 NAM	ie				,
STREET ADDRESS	140 12TH AVE N E		2.3 STR	EET ADDRESS				
CITY-ST-ZIP	ST PETERSBURG, FL 00000) 	2.4 CIT	Y-\$T-ZIP				
TITLE	PD	☐ DELETE	3.1 TITL				Chan	ge Addition
NAME	AMICK, ANTOINETTE W.		3.2 NAN	ie				ļ
STREET ADDRESS	140 12TH AVE., N.E.		3.3 STF	EET ADDRESS				Ì
CITY-ST-ZIP	ST PETERSBURG, FL 00000	- 	3.4. CIT	Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITL	Ε			Chan	ge Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP			4.4 CIT	'-ST-ZIP				
TITLE		☐ DELETE	5.1 ΠΠ	E			☐ Chan	ge Addition
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY-ST-ZIP				'-ST-ZIP				
TITLE		☐ DELETE	6.1 TITL	E [☐ Chan	ge Addition
NAME			6.2 NAA	ie				ļ
STREET ADDRESS			6.3 STF	EET ADDRESS				ļ
CITY-ST-ZIP ·	2.140 · 1		6.4 CIT	/-ST-ZIP				

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 that 1910 or n an artischment with an address, with all other like empowered.

SIGNATURE