

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 # 364178

1. Corporation Name

GREAT ATLANTIC BOILER SERVICES, INC.

Principal Place of Business

1721 EGNER STREET  
POST OFFICE BOX 1164  
JACKSONVILLE FL 32201-1164

Mailing Address

1721 EGNER STREET  
POST OFFICE BOX 1164  
JACKSONVILLE FL 32201-1164

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/18/1970

4. FEI Number

59-1295340

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 the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

GRIFFIN, DONALD E.  
1721 EGNER ST.  
JACKSONVILLE FL 32206

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

TITLE COB  
NAME GRIFFIN, DONALD E.  
STREET ADDRESS 1721 EGNER STREET  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE P  
NAME FERRELL, RICHARD B.  
STREET ADDRESS 2517 SNOWY EGRET DRIVE  
CITY-ST-ZIP JACKSONVILLE FL

☒ DELETE

TITLE VP  
NAME BUSTER, FALLIN  
STREET ADDRESS P.O. BOX 1164 N/S  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE VP  
NAME SMITH, CHARLES  
STREET ADDRESS 10410 TULSA ROAD  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE ST  
NAME ARNOLD, JEWEL F  
STREET ADDRESS 10526 RUNNING OAK CT.  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

*Donald E. Griffin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald E. Griffin

1/6/99

Date

904-359-0283

Daytime Phone #

CR2E034 (11/98)