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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 377174

 Corporation 	n Name						
G.C. MEASEL AND SON, INC.					C 100100 (1111 (1001) 1000) 1101(1001) 5001 5101	ALL BERE REGEL BERE R	1811 81811 1881 ·
Principal Place	e of Business	Mailing Address	-		- 10001000 (1131 100014 100001 110114 (00114 0103 04	#11 B1811 B1811 B1814 B1	1811 BIBIT 1981
5308 D'ORSAY STREET 5308 D'ORSAY STREET SARASOTA FL 34232 SARASOTA FL 34232							
					DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed 02/15/1971		i
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap:	plied For
21 26		— ·	1		59-1346479 Not Applicat		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
27					J. Germanical of Gards Desired	Fee Re	
City & State City & State					6. Election Campaign Financing	\$5.00	
Zip Country		Zip Country		Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible			
Zip			10		Personal Property Tax.		
24	9. Name and Address of Curr				10. Name and Address of New Register	red Agent	
			81	Name			
MEASEL JR,G C			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
2010 LENA LANE							
SAH	ASOTA FL 34240		83				
			84	City		85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	s, the above	e-named corp	oration submits this statement for the purpose	e of changing its	registered
office or r agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was au gations of, Section 607.0505, Flor	ithorized by ida Statutes	tne corporation.	on's board of directors. I hereby accept the ap	ppolitiment as reg	Jistereu
SIGNATURE							
Signature, speed of primer hand at registered age.			Registered Ager	nt signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		RS IN 12
12.	PT	DELETE 1.1			ABBITIONS OF PROEST OF STREET	☐ Change	Addition
NAME	MEASEL, STEPHEN D.		12 NAME				
STREET ADDRESS	2190 LENA LANE		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-S	T-ZIP			
TITLE	VS	☐ DELETE	2.1 TITLE		-	☐ Change	☐ Addition
NAME	MEASEL, RANDALL D		2.2 NAME				
STREET ADDRESS	7054 MAUNA LOA		2.3 STREET ADDRESS		. * .		-
CITY-ST-ZIP	SARASOTA FL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE			☐ Change	Addition
TITLE			32 NAME				
NAME STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP		•		
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				•
CITY-ST-ZIP			4.4 CITY-ST-ZIP		<u> </u>		
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	1		5.2 NAME				
STREET ADDRESS	1			TADORESS			
CITY-ST-ZIP			5.4 CITY - S 6.1 TITLE	IT-ZIP		Change	Addition
TITLE		☐ DELETÉ				□ Change	
NAME			6.2 NAME 6.3 STREE	T ADDRESS			
I OTHERT ARREST			E VALUE				

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.

64 CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

CITY-ST-ZIP

ICER OR DIRECTOR

7 Jan 99

CR2E034 (11/98)