

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

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90025 002 \*\*\*150.00

DOCUMENT # 496879

1. Corporation Name  
THERMOPLASTIC SOLUTIONS, INCORPORATED

Principal Place of Business  
1251 SEEDS AVENUE  
SARASOTA FL 34237

Mailing Address  
1251 SEEDS AVENUE  
SARASOTA FL 34237



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/18/1976

4. FEI Number

59-1644555

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

10. Name and Address of New Registered Agent

SHANNON, DONNA P.  
1251 SEEDS AVE.  
SARASOTA FL 34237

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 P ☐ DELETE  
NAME SHANNON, DONNA P.  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

TITLE D ☐ DELETE  
NAME PICKETT, WANDA  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

TITLE T ☐ DELETE  
NAME WASDIN, RANDALL  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

TITLE D ☐ DELETE  
NAME PICKETT, JOHN  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

TITLE V ☐ DELETE  
NAME GOODELL, WILLIAM  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

TITLE V ☐ DELETE  
NAME SNODGRASS, KEITH  
STREET ADDRESS 1251 SEEDS AVENUE  
CITY-ST-ZIP SARASOTA FL 34237

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME V CYNTHIA A LAGASSE  
1.3 STREET ADDRESS 1251 SEEDS AVE  
1.4 CITY-ST-ZIP SARASOTA FL 34237

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME V ELIZABETH GRAY  
2.3 STREET ADDRESS 1251 SEEDS AVE  
2.4 CITY-ST-ZIP SARASOTA, FL. 34237

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME V LINDA SNODGRASS  
3.3 STREET ADDRESS 1251 SEEDS AVE  
3.4 CITY-ST-ZIP SARASOTA FL 34237

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:

SIGNATURE *John Pickett*

4-27-99

Date

941 366-7080

Daytime Phone #

CR2E034 (11/98)

0475666