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**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 633415

1. Corporation Name

PLANTERS SUPPLIES, INC.

| Principal Place   | e of Business   | Mailing Address                    |  |  |   |   |               |                            |                   |
|---|---|------------------------------------|--|--|---|---|---------------|----------------------------|-------------------|
| 300 A ANSIN R   |   | P O BOX 560572                     |  |  |   |   |               |                            |                   |
| P O BOX 560572 P O BOX 560572<br>ROCKLEDGE FL 32955 ROCKLEDGE FL 32956-057  |   |                                    | 572  | ı  |   | DO NOT WE   | RITE IN THIS  | SPACE                      |                   |
| US US   |   |                                    |  |  |   | 3. Date Incorporated or Qualife                     |               |                            |                   |
|   |   |                                    |  |  |   | 08/22/1979  |               |                            |                   |
| 2. Principal P  | lace of Business  | 2a. Mailing Address                |  |  |   | 4. FEI Number                                       |               | Ar                         | plied For         |
| 21  |   | 26                                 |  |  | 59-1931387  |   | No            | ot Applicable              |                   |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.                |  |  | 5. Certifcate of Status Desired                     | ×   | *             | Additional                 |                   |
| 22  |   | 27                                 |  |  | 3. Cormono di Cialda Dosilio                        |   |               | equired                    |                   |
| City & State  |   | City & State                       |  |  | 6. Election Campaign Financing                      | ' _   |               | May Be                     |                   |
| 23  |   | 28                                 |  |  |   | Trust Fund Contribution                             |               |                            | to Fees           |
| Zip   | Country   | Zip                                | Cou  | intry  |   | 8. This corporation owes the cu                     | rrent year In | tangible<br>[]] Yes        | <b>⊠</b> No       |
| 24  | 25  | 29                                 | 30   |  | <del></del>   | Personal Property Tax.  10. Name and Address of New | Panistared    |                            | Ligio             |
|   | 9. Name and Address of Cur  | rrent Registered Agent             |  | 81   | Name  | 10. Name and Address of New                         | registered    | Aguint                     |                   |
| RILE  | Y, JAMES  |                                    |  |  |   |   |               |                            |                   |
| 300 ANSIN RD.   |   |                                    |  | 82   | Street Addre  | ess (P.O. Box Number is Not Accep                   | itable)       |                            |                   |
| ROC   | KLEDGE FL 32955   |                                    |  | 83   |   |   |               |                            |                   |
|   |   |                                    |  |  |   |   |               |                            |                   |
|   |   |                                    |  | 84   | City  |   | FL            | 85 Zip                     | Code              |
| 11 Pursuant   | to the provisions of Sections 607.  | 0502 and 607.1508, Florida Stat    | utes, the a  | bove-  | named corpo   | oration submits this statement for th               | e purpose o   | f changing its             | registered        |
| office or r   | egistered agent, or both, in the St<br>m familiar with, and accept the ob | ate of Florida. Such change was    | authorized   | i by ti  | he corporatio                                       | on's board of directors. I hereby acc               | ept the appo  | intment as re              | egistered         |
| •   | in iainiliai willi, aliu accept life ob                                   | ingations of, Section 601.0500, 1  |  | atos.  |   |   |               |                            |                   |
| SIGNATURE   | Signature, typed or printed name of registered                            | agent and title if applicable. (NO | TE: Registered   | Agent :  | signature required                                  | d when reinstating)                                 | DATE          |                            |                   |
| 12.   | OFFICERS  | AND DIRECTORS                      | 13.  |  |   | ADDITIONS/CHANGES TO O                              | FFICERS A     |                            |                   |
| TITLE   | PS  | ☐ DELETE                           | 1.1 TF   | TLE  |   |   |               | Change                     | Addition          |
| NAME  | riley, James  |                                    | 1.2 N  | A LAC  |   |   |               |                            |                   |
| STREET ADDRESS  | 300 Ansin RD.   |                                    |  | WIL  |   |   |               |                            |                   |
| CITY-ST-ZIP   | ROCKLEDGE FL  |                                    | 1.3 \$1  |  | ADDRESS   |   |               |                            |                   |
| TITLE   |   |                                    |  |  |   |   |               |                            |                   |
| NAME  | VP  | ☐ D£LETE                           |  | TY-ST-   |   |   |               | Change                     | Addition          |
| STREET ADDRESS  | VP<br>RILEY, RICHARD A  | ☐ DELETE                           | 1.4 CI   | TY-ST-<br>TLE  |   |   |               | Change                     | Addition          |
|   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI<br>2.1 TI<br>2.2 NJ   | TY-ST-<br>TLE<br>AME   |   |   |               | Change                     | ☐ Addition        |
| CITY-ST-ZIP   | VP<br>RILEY, RICHARD A  |                                    | 1.4 CI<br>2.1 TI<br>2.2 NJ<br>2.3 ST<br>2.4 C  | TY-ST-<br>TLE<br>AME<br>TREET A  | ADDRESS   |   |               |                            |                   |
| CITY-ST-ZIP<br>TITLE  | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 SI<br>2.4 C<br>3.1 TI  | TY-ST-<br>TLE<br>AME<br>TREET A<br>TTY-ST-   | ADDRESS   |   |               | ☐ Change                   | Addition          |
|   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  |                                    | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 SI<br>2.4 C<br>3.1 TI<br>3.2 NV  | TY-ST- TLE AME TREET A STY-ST- TLE AME   | ZIP  ADDRESS - ZIP                                  |   |               |                            |                   |
| TITLE   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  |                                    | 1.4 CI<br>2.1 TI<br>2.2 NV<br>2.3 SI<br>2.4 C<br>3.1 TI<br>3.2 NV<br>3.3 SI  | TREET A TY-ST- TLE AME TREET A TLE AME TREET A   | ZIP  ADDRESS -ZIP  ADDRESS                          |   |               |                            |                   |
| TITLE<br>NAME   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TT 3.2 N/ 3.3 ST 3.4 C   | TREET A TY-ST- TLE AME TY-ST- TLE AME TREET A TREET A  | ZIP  ADDRESS -ZIP  ADDRESS                          |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  |                                    | 1.4 CI 2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT  | TY-ST- TLE  AME TY-ST- TLE  AME TREET A  TLE  AME TREET A  TLE  TREET A  | ZIP  ADDRESS -ZIP  ADDRESS                          |   |               |                            |                   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TI 2.2 NV 2.3 SI 2.4 C 3.1 TI 3.2 NV 3.3 SI 3.4 C 4.1 TI 4.2 N  | TY-ST- TLE AME TY-ST- TLE AME TREET A  | ADDRESS - ZIP  ADDRESS - ZIP                        |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TI 2.2 NJ 2.3 SI 2.4 C 3.1 TI 3.2 NJ 3.3 SI 3.4 C 4.1 TI 4.2 NJ 4.3 SI  | TY-ST- TLE AME TY-ST- TLE AME TREET A TLE TREET A TLE TY-ST- TLE TREET A   | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP              |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                       | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TI 2.2 N 2.3 SI 2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N 4.3 S 4.4 CI  | TY-ST- TLE TREET A TTY-ST- TLE TREET A TTY-ST- TLE TTY-ST- TLE TTLE TTLE TTLE TTLE TTLE TTLE TTL   | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP              |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE                                 | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TI 2.2 N 2.3 SI 2.4 C 3.1 TI 3.2 N 3.3 Si 3.4 C 4.1 TI 4.2 N 4.3 Si 4.4 CI 5.1 TI   | TY-ST- TLE  AME TREET A  TILE  AME TREET A  TILE  AME TY-ST- TLE  AME TY-ST- TLE  TY-ST- TLE  TY-ST- TLE  TY-ST- TLE   | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP              |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME                            | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C 3.1 TI 3.2 N/ 3.3 Si 3.4 C 4.1 TI 4.2 N/ 4.3 Si 4.4 CI 5.1 TI 5.2 N/   | TY-ST- TLE  AME TY-ST- TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL   | ADDRESS -ZIP  ADDRESS -ZIP  ADDRESS -ZIP            |   |               | ☐ Change                   | ☐ Addition        |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 14 CI 2.1 TI 2.2 NV 2.3 SI 2.4 CC 3.1 TI 3.2 NV 3.3 SI 3.4 .C 4.1 TI 4.2 NV 4.3 SI 4.4 CI 5.1 TI 5.2 NV 5.3 SI 5.3 | TY-ST- TLE THE   | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP |   |               | ☐ Change                   | ☐ Addition        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 14 CI 2.1 TI 2.2 NV 2.3 SI 2.4 CC 3.1 TI 3.2 NV 3.3 SI 3.4 .C 4.1 TI 4.2 NV 4.3 SI 4.4 CI 5.1 TI 5.2 NV 5.3 SI 5.3 | TY-ST- TLE  AME TREET A  TILE  TILE | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP |   |               | ☐ Change                   | ☐ Addition        |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS   | VP<br>RILEY, RICHARD A<br>962 SABLE LANE                                  | ☐ DELETE                           | 14 CI 2.1 TI 2.2 N 2.3 SI 2.4 C 3.1 TI 3.2 N 3.3 Si 3.4 C 4.1 TI 4.2 N 4.3 Si 4.4 CI 5.1 TI 5.2 N 5.3 Si 5.4 CI  | TY-ST- TLE  AME TREET A  TREET A  TREET A  TREET A  TREET A  TLE  TREET A  TTY-ST- TLE  TTY-ST- TLE  TTY-ST- TLE  TTY-ST- TLE  TTY-ST- TLE   | ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP |   |               | ☐ Change ☐ Change ☐ Change | Addition Addition |

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 chapter, on an attack that my name address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CR2E034 (11/98)