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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90017 024 ***150.00

DOCUMENT # 639284

1. Corporation Name

S.G. WEST & SONS, INC.

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RO BOX 3827 TALLAMSSEE F1 32015427 US 3. Date incorporated or Qualified 10/10/1979 2. Principal Place of Business 2. Mailing Address 3. Date incorporated or Qualified 10/10/1979 2. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Date incorporated or Qualified 10/10/1979 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Principal Place of Business 3. Date incorporated or Qualified 10/10/1979 3. Date incorporated or Qualified 10/10/1979 3. Date incorporated or Qualified 10/10/1979 3. Date incorporated or Status Desired 3. Date incorporated or Stat	Principal Place	of Business	Mailing Address					I BIBLI BIBLI DI	
3. Date Incorporation of Qualified 10/01/1979 2. Principal Place of Business 2a. Mailing Address 2. 20/3D DELTA WAY 5.9° 1950571 Not Applicable 5.9° 1950571 Not Applicabl	P O BOX 3827 1925 N MONROE ST		TALLAHASSEE FL 32301		DO NOT WRIT	E IN THIS S	PACE		
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Suite, Api #, etc. Suite,						10/10/1979			
Suite, Apt #, etc. Suite, Apt #, etc.	2. Principal Pl	lace of Business	— a – a".			l e		· ;	
S. Certificate of Statute Search Fee Required Fee Required Fee Required Fee Required Statute	21			WAY		59-1950571	*>		
City & State 27		#, etc.	<u> </u>			5. Certifcate of Status Desired			I
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Zip Country Zip Country Zip Country 2 2 3 3 2 5 8 5 5 W.S. No. Parsonal Property Tax. We we will not be provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. The presuant 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 agent. at maintains with, and accept the obligations of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. at maintains with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. at maintains with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. at maintains with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE		.		E F	L	· ·		• -	, ,
28 28 29 32.3C/8 30 W.S. Personal Property Tax. Yes No.		Country					nt year Intar	ngible	
9. Name and Address of Current Registered Agent FREEMAN-REES, SARAH L 922 E LAFAYETTE ST C TALLAHASSEE FL 32301 84 City TALLAHASSEE FL 32301 85 Street Address (P.O. Box Number is Not Acceptable) 7. ORD O'ELTA LAHA 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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. STREET ADDRESS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. SARANELL COURT 16. STREET ADDRESS 17. DELETE 18. TITLE 19. VP 19. DELETE 19. TITLE 19. VP 10. STREET ADDRESS 19. STREET ADDRESS 20. STREE	24	25	29 32308 30	NS.		· ·			□No
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922 E LAFAYETTE ST C TALLAHASSEE FL 32301 82 Street Aggress (P.O. Box Number's Non Acceptable) 83 Street Aggress (P.O. Box Number's Non Acceptable) 84 City				81	Name				
TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-mand corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes, the above-mand corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes, the above-mand corporation submits this statement for the purpose of changing its registered agent, and statutes, and accept the obligations of, Section 607,0505, Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY ST. 2P THE STREET ADDRESS CITY-ST. 2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 168 SARANELL COURT 15. STREET ADDRESS CITY-ST. 2P 168 S. Zip Code 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST. 2P 15. TITLE 168 SARANELL COURT 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANGES TO OFFIC					Street Ad	dress (P.O. Box Number is Not Acceptal	ble)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-mental corporation submits this statement for the purpose of changing its 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, 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, 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 agent and see it registered agent agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.					<u> ZDSD</u>				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hand corporation students this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized authorized submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. TITLE 14. OFFICERS AND DIRECTORS 11. TITLE 15. TITLE 16. ST DELETE 17. TITLE 17. TITL	TALLAHASSEE FL 32301			83					1
11. Pursuant to the provisions of Sections 607 G502 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 were submitted agent. In an immiliar with, and accept the obligations of, Section 607/0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent agrential agrential and printed agent and the if applicable. (NOTE: Registered Agent agrential ag				84	City				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby steept the appointment as registered agent agent with, and accept the obligations of, Section 807.0505, Florida Statutes. Signature		·			TALL	AHASSEE			
Agent. I am familiar with, and accept the obligations of, Section 607.0505, Findrad Statutes. SIGNATURE Signature, Typed or printed name of registered agent and 1/fe if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME FREEMAN-REES, SARAH L 618 SARANELL COURT LAWRENCEVILLE GA 30043 TITLE NAME POSEY, PAUL A 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP NAME WORTMAN, LESLIE F 5 CHACHAPACASSET RD BARRINGTON RI 02806 DELETE 4 1 TITLE DELETE 4 2 NAME 4 2 NAME 4 2 NAME 4 3 STREET ADDRESS CITY-ST-ZIP DELETE 4 1 TITLE DELETE 5 THILL AHA SSEE F, S2301 Change Addition Addition Change Change Change Change Change Change Change Change	office or re	egistered agent, or both, in the State of	Florida, Such change was autho	orized by t	-named co he corpora	rporation submits this statement for the parties board of directors. I hereby accept	t the appoint	ment as reç	jistered
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12. OFFICERS AND DIRECTORS TITLE PVP FREEMAN-REES, SARAH L STREET ADDRESS 618 SARANELL COURT LAWRENCEVILLE GA 30043 TITLE POSEY, PAUL A 922 E LAFAYETTE ST C TALLAHASSEE FL 32301 TITLE NAME STREET ADDRESS CITY-ST-ZIP WORTMAN, LESULE F 5 CHACHAPACASSET RD BARRINGTON RI 02806 BARRINGTON RI 02806 TITLE NAME DELETE 1.1 TITLE 1.1 TITL	SIGNATURE		4,675.0	:		ited whose selectations	DATE		
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14. I hereby certify that the information supplied with this filing does nonqualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

850-386-4443