## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 650396

(5)

CODDING SAND & SOIL, INC.

Principal Place of Business 3765 CODDING PLACE MOUNT DORA FL 32757-2008		Mailing Address  3795 CODDING PLACE MOUNT DORA FL 32757-2217			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				01/08/1980	05/01/1996
<del></del>		2a. Mailing Address		4. FEI Number 59-1968912	Applied For
			26 3300 State Road 46		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ☐ Yes ☐ No
<del>/=-1</del>	9. Name and Address of Curr		<u> </u>	10. Name and Address of New Re	egistered Agent
11. Pursuant office or r	5 CODDING PLACE UNT DORA FL 32757  to the provisions of Sections 607.03 egistered agent, or both, in the Sta m familiar with, and accept the obto	ite of Florida. Such change was au	83  84 City No U  3, the above-named conthorized by the comport	ONING DOWN D  dress (P.O. Box Number is Not Acceptal  O. STATE ROAD YEAR  NT DORN  reporation submits this statement for the pation's board of directors. I hereby acce	FL 85 7to Code 7
SIGNATURE	Signature, lyped or printed name of registered a	agent and title if applicable (NOTE:	Registered Agent signature requ	uired when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	PST	<b>™</b> DELETE	1.1 HILE	PSI	Change Addition
NAME	CODDING, BELVA A		1.2 NAME	DOMALD L. CODINING	
STREET ADDRESS	3795 CODDING PLACE		1.3 STREET ADDRESS	300 STATE PIND 46	
CITY-ST-ZIP	MOUNT DORA FL		1.4 CITY-ST-ZIP	NUMBER 123 PR 3075	<b>5</b> 7
TITLE	VD	DELETE	2 1 TITLE	<u></u>	Change Addition
NAME	CODDING, DONALD L.		2.2 NAME		
STREET ADDRESS	3795 CODDING PLACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MOUNT DORA FL		2 4 CITY-ST-ZIP		s
TITLE	INSTITUTE OF THE PROPERTY OF T	DELFTE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS		
CITY-ST-ZIP			3.4. CHY-S1-ZP		
TITLE		DELETE	4 1 1/ILE		Change Addition
NAME			4. 2 NAME		

6.4 CITY-ST-ZIP

14. I do 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 of the receiver or trylifer empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed or on an attacking with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY+ST- ZIP

6.3 STREET ADORESS

4.4 CITY - \$1 - ZIP

5.1 HILE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

CIGNATURE.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

TITLE

NAME STREET ADDRESS

4-13-99

350-383-2011

Change

Change

Addition

Addition

**FILED** 

Jun 03 1997 8:00am

Secretary of State