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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

**/**0\

INDUSTRIAL TOOL AND DIE COMPANY														
Principal Place of Business					Mailing Address							61414 61611 6131 <b>1</b>		1 91911 1891
968 JOHN HALL DRIVE					PO DRAWER G									
GREEN COVE SPRINGS FL 32043 US					GREEN COVE SPGS FL 32043 US				DO NOT WRITE IN THIS SPACE					
••									3. Date Incorporated or Qualified					
	_										05/05/1980			
2.	Principal Place of	SS	2	2a. Mailing Address					4.	, FEI Number		Ar	plied For	
21			26	26					<u> </u>	59-1996971	=	No	ol Applicable	
-	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5.	, Certificate of Status Desired	□ \$	<b>8.75</b> / Fee Re	Additional
22	City & State				City & State					-	Election Campaign Financing			May Be
23					28					"			Added t	
= 21	Zip	Country						Country			, This corporation owes or has paid	the current	year Int	angible
24					9 30						Personal Property Tax due June 3	30. 🔲 Ye	s [	] No
9. Name and Address of Current Registered Agent								Ţ		10	Name and Address of New Reg	istered Agei	ıt	
BATTON, J DALE								١	łame					
	JAH 88Q						82	82 Street Add			P.O. Box Number is Not Acceptable	e)		
GREEN COVE SPRINGS FL 32043							-							
							83						,	
							84	0	City			FL 8	Zip (	Code
11	. Pursuant to the	ns of Sections 607	0502 and	607.1508, Florie	da Statutes	s, the above	e-n	amed corpo	oratio	on submits this statement for the pu	rnose of cha	nging it	s registered	
	office or register	nt, <b>or b</b> oth, in the Si , <b>and a</b> ccept the of	tate of Flo	rida. Such chan	ige was au	ithorized by	y th	e corporation	on's	board of directors. I hereby accept	the appointr	nent as	registered	
Cit	GNATURE		, and accept the el	Silganons	01, 0000011 001	.0000, 11011	au diaidici	<b>.</b>						
ō		e, typed or	printed name of registero			(NOTÉ:	Registered Age	ent s	ignature require			DATE		
12			OFFICERS	AND DIRE			13.				ADDITIONS/CHANGES TO OFFICE	<del></del>	·· · · · · · · · · · · · · · · · · · ·	
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NAME BATTON, JIMMIE							1.2 NAME							
	STREET ADDRESS 968 JOHN HALL DR							1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						
CRT		GREEN COVE SPS FL				DELETE			IP	· <del>-</del> ···			Change	Addition
NAI	1 *	KOHLENBERGER, LYLE			٠. ت	2.1 TITLE 2.2 NAME						Jimango	radiadii	
	REET ADDRESS 968 JOHN HALL DR							2.3 STREET ADDRESS						
	CITY-ST-ZIP GREEN COVE SPS FL							2. 4 CITY - ST - ZIP						
	TLE				☐ DI	3.1 TITLE				<del></del>		Change	Addition	
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NA	!						63 STREET	ነ ልሱ፣	10556					
STREET ADDRESS CITY-ST-ZIP							6.4 CITY-S							
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14. Thereby 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, so on an attachment with an address.

**FILED** 

Jan 20 1998 8:00am

Secretary of State