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 #

POLYMER PRODUCTS & SERVICES, INC.

(1)

Feb 12 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address						6161 61611 61611		. B
	AVENUE (32603)		1604 NW 8TH AVENUE (32603)				:	
P O BOX 13927 GAINESVILLE FL 32604		P O BOX 13927			DO NOT WRITE IN THIS SPACE			
OMINEOVILLE	FE 32004	OMMESTILLE FL	GAINESVILLE FL 32604			3. Date Incorporated or Qualified		
					07/01/1981			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	•	Ap	plied For
21		26			59-2105199		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional			
22		27			C. Commodic of States Doore	~ <u> </u>	Fee Re	quired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23] Zip			Cour	Trust Fund Contribution Adder Country 8. This corporation owes or has paid the current year I				
24	25	29	30	ii y	8. This corporation owes or h Personal Property Tax due			angible No
24]	9. Name and Address of Curr		[30]		10. Name and Address of Ne			1110
RF	ATTY, CHARLES L			Name				
1604 NW 8TH AVENUE GAINESVILLE FL 32603			ļ.	50 60 4 3				
			'	Street Add	dress (P.O. Box Number is Not Acc	eptable)		
			Ī	33		•		
			l.	14 04			las las c	\- d-
				Gity City		FL	85 Zip C	
11. Pursuant	to the provisions of Sections 607 0	502 and 607.1508, Florida	Statutos, the ab	ove-named cor	rporation submits this statement for	the purpose of	changing its	registered
agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such chang igations of, Section 607 0	e was authorized 505, Florida Statu	by the corporates.	rporation submits this statement for ation's board of directors. I hereby	accept the appo	ointment as i	registerea
SIGNATURE	Signature, typed or printed name of registered t	sement word filler it words older	(NOTE Barristored	Agent tinnaliya regi	uired when reinstating)	DATE		
12.		ND DIRECTORS	13.	ngent signature requ	ADDITIONS/CHANGES TO		DIRECTOR	S IN 12
TITLE	DP	☐ DEL		E			Change	Addition
NAME	BEATTY, CHARLES L.		1.2 NA	AE		٠		
STREET ADDRESS	1604 NW 8TH AVE		1.3 \$19	EET ADDRESS				
CITY-ST-ZIP	GAINESVILLE, FL 00000		1.4 C(T)	/-ST-ZIP				
TITLE		☐ DEL	ETE 2.1 Titl	E			Change	Addition
NAME			2.2 NA	AF				
\$TREET ADDRESS			2.3 STA	EET ADORESS				i
CITY-ST-ZIP				Y-ST-ZIP		·		
TITLE		☐ DELI	3.1 TITE	E			Change	☐ Addition
NAME			3.2 NAA					į
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP		No.		Y-ST-ZIP			Change	Addition
TITLE		L_J DFII	l l				Change	Addition
NAME CIPCET ADDRESS			4.2 NA					,
STREET ADDRESS			■	EET ADDRESS				į
CITY-ST-ZIP TITLE		□ DELI		r-ST-ZIP			Change	Addition
NAME			5.2 NAM				Oriange	
STREET ADORESS				EET ADDRESS				İ
CITY-S1-ZIP				-ST-ZIP			i	ŀ
TITLE		□ DEII					Change	Addition
NAME			62 NAM]				
STREET ADDRESS				EET ADORESS				ŀ
CITY-ST-ZIP				- ST - ZIP				
14 I hereby c	matification that informations are also of	with this those done not a			n Section 110 07/3Vi) Florida State	doo I further oo	differ these the	information

indicated on this arrival report or supplies with this information indicated on this arrival report or supplies with the information indicated on this arrival report or supplies the proof 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 man all tehment with an address.