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Apr 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **713692** (2)
1. Corporation Name

Florida Recyclers Association, Inc.

Principal Place of Business Mailing Address

3. Date Incorporated or Qualified

11/22/1967

4. FEI Number

59-2545102

Applied For

Not Applicable

2. Principal Place of Business

21 P.O. Box 1585

Suite, Apt. #, etc.

22

City & State

Lakeland Fl.

24 Zip

33802

25 Country

U.S.

2a. Mailing Address

26 P.O. Box 1585

Suite, Apt. #, etc.

27

City & State

Lakeland Fl.

29 Zip

33802

30 Country

U.S.

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

XX No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

XX No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Steve Carey

82 Street Address (P.O. Box Number is Not Acceptable)

3330 E. Main St.

83

84 City

Lakeland

FL

85 Zip Code

33801

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

STEVE CAREY

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/2/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

PD
Eric Berman
P.O. Box 3065 N/A
Jacksonville, Fl. 32206

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

V/D
Bernard Leibov
1701 NW 31st Street
Ft. Lauderdale, Fl. 33311

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

S/T/D
Steve Carey
3330 E. Main St.
Lakeland, Fl. 33801

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

200002484808
-04/10/98--01008--004
*****70.00**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STEVE CAREY

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/98

941-665-7157

CR2E037 (10/97)