

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90029 012 ****61.25

DOCUMENT # 727293

1. Corporation Name

THE FLORIDA SEPTIC TANK ASSOCIATION, INC.

499200-90029-12

Principal Place of Business

23923 NW 196 TERR
HIGH SPRINGS FL 32643
US

Mailing Address

PO BOX 894
HIGH SPRINGS FL 32655
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

08/08/1973

4. FEI Number

59-1494885

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LYNCH JR, ROBERT R
23923 NW 196 TERR
HIGH SPRINGS FL 32643

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~PD~~ ☒ DELETE

NAME ~~BINGHAM, DEWAYNE~~
STREET ADDRESS ~~3640 SUMNER ROAD~~
CITY-ST-ZIP ~~DOVER FL~~

TITLE ~~TD~~ ☒ DELETE

NAME ~~NEWSOME, MITCHELL~~
STREET ADDRESS ~~788 NW 10TH AVE~~
CITY-ST-ZIP ~~GAINESVILLE FL~~

TITLE VPD ☐ DELETE

NAME DUKE, JOSEPH
STREET ADDRESS 3070 BLANDING BLVD.
CITY-ST-ZIP MIDDLEBURG FL

TITLE VPD ☐ DELETE

NAME CASTER, DAVID
STREET ADDRESS 17550 CAPPER LANE
CITY-ST-ZIP ESTERO FL

TITLE SD ☐ DELETE

NAME PINKAS, GARY
STREET ADDRESS 7117 49TH TERR N
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME TD
1.3 STREET ADDRESS DRIGGERS, DEAN
1.4 CITY-ST-ZIP 2601 COLLEGE AVE. E.
RUSKIN, FL 33570

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP MIDDLEBURG, FL 32068

4.1 TITLE PD ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ESTERO, FL 33928

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME SD
6.3 STREET ADDRESS MANN, JEFFREY
6.4 CITY-ST-ZIP 4267 OLD EAGLE LAKE ROAD
BARTOW, FL 33830

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

4/22/99 813 645 648

CR2E037 (11/98)