

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90015 010 ***150.00

DOCUMENT # F24930

1. Corporation Name

HARTLE INVESTMENT COMPANY

Principal Place of Business

**6413 NE 159TH ST.
#19-302
BOTHELL WA 98011
US**

Mailing Address

**6413 NE 159TH ST.
#19-302
BOTHELL WA 98011
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1981

4. FEI Number

59-2179006

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

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 970 W. Broadway

2a. Mailing Address

26 970 W. Broadway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 372

27 # 372

City & State

City & State

23 Jackson, Wyoming

28 Jackson, Wyoming

Zip Country

Zip Country

24 83001-9475 25 U.S.

29 83001-9475 30 U.S.

9. Name and Address of Current Registered Agent

**HARTLE, JAMES F. JR.
9103 BAY COVE LANE
JACKSONVILLE FL 32257**

10. Name and Address of New Registered Agent

81 Name

Johnson, Pamela A.

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

1650-2 Beach Avenue

83

84 City

Atlantic Beach,

FL

85 Zip Code

32233

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Pamela A. Johnson*

1-20-99

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DV** ☐ DELETE
NAME **VESEY, CAROLYN**
STREET ADDRESS **10285 OSPREY TRACE S**
CITY-ST-ZIP **WEST PALM BEACH FL 33412**

TITLE **DP** ☐ DELETE
NAME **HARTLE, HAL M**
STREET ADDRESS **P O BOX 659**
CITY-ST-ZIP **BOCA GRANDE FL 33921**

TITLE **DV** ☐ DELETE
NAME **JOHNSON, PAMELA**
STREET ADDRESS **17055 BARRYKNOLL WAY**
CITY-ST-ZIP **GRANGER IN**

TITLE **TMD** ☐ DELETE
NAME **HARTLE, JAMES F. JR.**
STREET ADDRESS **9103 BAY COVE LANE**
CITY-ST-ZIP **JACKSONVILLE FL**

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

3.1 TITLE **DV** ☒ Change ☐ Addition
3.2 NAME **Johnson, Pamela A.**
3.3 STREET ADDRESS **1650-2 Beach Avenue**
3.4 CITY-ST-ZIP **Atlantic Beach, FL 32233**

4.1 TITLE **TMD** ☒ Change ☐ Addition
4.2 NAME **Hartle, James F. Jr.**
4.3 STREET ADDRESS **970 W. Broadway, # 372**
4.4 CITY-ST-ZIP **Jackson, WY 83001-9475**

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
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)