## 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

## DOCUMENT # F31418 1. Corporation Name

H.A. STEELE, INC.

**FILED** Feb 17, 1999 8:00am **Secretary of State** 

02-17-1999 90042 033 \*\*\*150.00



Principal Place of Business  Malling Address 2200 SHEPARD ST. #06 2200 SHEPARD ST. #06 2200 SHEPARD ST. #06 2200 SHEPARD ST. #06 221  2. Principal Place of Business 2a. Mailing Address 2a. Mailing Address 2a. Mailing Address 2b. Let Apt. #, etc. 2c. Principal Place of Business 2a. Mailing Address 2a. Mailing Address 2b. Let Apt. #, etc. 2c. Suite. Apt. #, etc. 2c. Suite. Apt. #, etc. 2c. City & State 2d. Country 2d. State 2d. City & Stat
ACKSONVILLE FL 32211  JACKSONVILLE FL 32211  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified Od/2/1/1981  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified Od/2/1/1981  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified Od/2/1/1981  3. Suite, Apt. #, etc. 3. Date Incorporated or Qualified Od/2/1/1981  3. Suite, Apt. #, etc. 5. Suite, Apt. #, etc. 5. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Additio
3. Date Incorporated or Qualified 4/4/21/1981 2. Principal Place of Business
Applied For   Not Applied For
Principal Place of Business   Za. Mailing Address   A. FEI Number   Solution Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Solution Apt.
Suite, Apt. #, etc.   S. Certificate of Status Desired   Set. 75 Additional Fee Required.   See Required.
Suite, Apt. #, etc.   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   28   Suite   28   Suite   35   Su
27   City & State
City & State  Country  City & State  Country  City & State  City & State  City & State  Country  City & State  Cit
Zip   Country   Zip   Country   Zip   Country   St. This Corporation was the current year Intalighter
Zip
25   29   30   Personal Property Tax.   10   Name and Address of New Registered Agent   10   Name and Address   10   Name an
9. Name and Address of Current Registered Agent  STEELE, H.A.  2280 SHEPARD ST. #606  JACKSONVILLE FL 32211  81  82 Street Address (P.O. Box Number is Not Acceptable)  83   Address (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code    65   City   FL   85   Zip Code    66   City   FL   86   Zip Code    67   City   FL   88   Zip Code    68   City   FL   88   Zip Code    69   City   FL   88   Zip Code    60   City   FL   88   Zip Code    60   City   FL   80   Zip Code    61   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 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 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 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 of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered when remistating.  12. OFFICERS AND DIRECTORS
STEELE, H.A.  2280 SHEPARD ST. #606  JACKSONVILLE FL 32211  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 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 are 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 office or registered agent, or both, in the State of Florida. Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent agent and title if applicable.  (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP  DELETE  11.1TILE  DS  ACKSONVILLE, FL 00000 32211  TITLE  DS  STREET ADDRESS  JACKSONVILLE FL 32211  DELETE  3.1TILE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZP  TITLE  DELETE  AITHUE  Change  Addition  Change  Addition
2280 SHEPARD ST. #606  JACKSONVILLE FL 32211  83  84 City  FL  85  Zip Code  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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, hyndo or printing name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  DP  STEELE, H A  2280 SHEPARD ST. #606  13. STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE, FL 00000 32211  TITLE  DS  STEELE, SUSAN G  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL 32211  DELETE  3.1 TITLE  DELETE  3.1 TITLE  MME  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  MME  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  Change  Addition  Change  Addition
2280 SHEPARD ST. #606  JACKSONVILLE FL 32211  83  84 City  FL 85 _Zip Code  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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  DP DELETE  1.1 TILE  STEELE, H A  STEELE, H A  STEELE, H A  STEELE, H A  1.2 NAME  STEELE, H A  STEELE, BUSAN G  STEELE, SUSAN G  STEELE, SUS
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP  Change Addition  TITLE  DS  STREEL, H A  2280 SHEPARD ST. #606  1.3 STREET ADDRESS  JACKSONVILLE, FL 00000 32211  TITLE  DS  STEELE, SUSAN G  STREET, SUSAN G  STRE
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  OP  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  OP  STREEL, H A  2280 SHEPARD ST. #606  1.3 STREET ADDRESS  JACKSONVILLE, FL 00000 32211  ITILE  OS  STEELE, SUSAN G  STREET, DORGESS  CITY. ST. ZIP  JACKSONVILLE FL 32211  DELETE  3.1 TITLE  Change  Addition  OCHANGE  OCH
office or registered agent, or both, in the State of Priorital 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  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP  NAME  STEELE, H A  12 NAME  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE, FL 00000 32211  ITILE  DS  STEELE, SUSAN G  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL 32211  DELETE  3.1 TITLE  Change  Addition  CHANGE  Addition  TITLE  NAME  STEELE, SUSAN G  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL 32211  DELETE  3.1 TITLE  ACTIV-ST-ZIP  CHANGE  STREET ADDRESS  CITY-ST-ZIP  ACKSONVILLE FL 32211  DELETE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  ACTIV-ST-ZIP  TITLE  CHANGE  Addition  CHANGE  Addition  Addition
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CITY-ST-ZIP JACKSUNVILLE, FL 00000 3/2211
CITY-ST-ZIP JACKSUNVILLE, FL 00000 3/2211
CITY-ST-ZIP JACKSUNVILLE, FL 00000 3/2211
TITLE DS  NAME STEELE, SUSAN G  STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  DELETE  3.1 TITLE  NAME STREET ADDRESS CITY-ST-ZIP  OFFICIAL STREET ADDRESS CITY-ST-ZIP  1. Change Addition  TITLE  TITLE  1. Change Addition  Addition  TITLE  TITLE  1. Change Addition  Change Addition  Addition  Change Addition
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TITLE         31 TITLE           NAME         32 NAME           STREET ADDRESS         33 STREET ADDRESS           CITY-ST-ZIP         34. CITY-ST-ZIP           TITLE         Change         Addition
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TITLE
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NAME   V. A. V. O.
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CITY-ST-ZIP         4.4 CITY-ST-ZIP         ☐ Change         ☐ Addition
TITLE DELETE 51 TITLE 52 NAME
NAME 53 STREET ADDRESS
STREET ADDRESS 5.4 CITY-ST-ZIP
CITY-ST-ZIP Change Addition
TITLE 62 NAME

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: