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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300004527 (8)
PRECIPITATOR SERVICES GROUP, INC.

FILED Feb 19 1998 8:00am Secretary of State



2/9/28

801549-231/

Principal Plac	e of Business	Mailing Address		4 (00)(09 1(14 10)00 1(1) 00(1) 00(1)	ite merri minori minan antia urbit bilar idas
P.O. BOX 339 ELIZABETHTON TN 37644 P.O. BOX 339 ELIZABETHTON TN 3764			44	DO NOT WIRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	IN THIS SPACE
				10/06/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	Broad Street		or 339	65-1276512	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 Additional
2 Elixabeth tru		27 Elizabe	4hton	Certificate of Status Desired	Fee Required
City & State	9	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23	1ennessee	28 10000		Trust Fund Contribution	Added to Fees
ر Zip	Country	Zip	Country	8. This corporation owes or has pa	–
24 3764	9. Name and Address of Current	29 37644 1 Seeletered Apont	30 USA	Personal Property Tax due June 10. Name and Address of New Re	
WA'		Luadistaten Wastr	B1 Name	10. Name and Address of New Ne	Bisteled Woellt
KAYTIS, JOHN R			VI Name		
APT. 203 3877 HERON COVE COURT				ress (P.O. Box Number is Not Acceptab	le)
PALM HARBOR FL 34684					
,,,,					
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statu	ites, the above-named con	poration submits this statement for the p	
office or r	egistered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such change was	authorized by the corpora	tion's board of directors. I hereby accep	of the appointment as registered
•	im ramiliar with, and accept the obliga	HOUS OF, SECTION 607.0505, F	IDNOB Statutes.		
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NC	TE: Registered Agent signature requi	red when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PDC	☐ DELETE	1.1 TITLE		Change Addition
NAME	NIDIFFER, CARL R		1.2 NAME		
STREET ADDRESS	RT 10 BOX 359		1.3 STREET ADDRESS		
CITY-ST-ZIP	ELIZABETHTON TN 37643		1.4 CITY-ST-ZIP		
TITLE	DST	☐ DELETE	2.1 TITLE	2.11.	☐ Change ☐ Addition
NAME	BUCK, TERESA L		22 NAME		
STREET ADDRESS	ISSAC LINCOLN RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	ELIZABETHTON TN 37643		2.4 CITY-ST-ZIP		
TITLE	D DANIEL K	☐ DELETE	3.1 TITLE		Change Addition
NAME	NIDIFFER, DANIEL K RT 10 BOX 258		3.2 NAME		
STREET ADDRESS	ELIZABETHTON TN 37643		3.3 STREET ADDRESS		
CITY-ST-ZIP	TO THE PERSON IN STORES	Dry etc	3.4. CITY-ST-ZIP		Classes L 44490-
TITLE	NIDIFFER, LISA D	☐ DELETE	4.1 TITLE		Change Addition
NAME STREET ADDOCSO	3503 BONDWOOD CIRCLE		4. 2 NAME		
STREET ADDRESS	JOHNSON CITY TN 37604		4.3 STREET ADDRESS		
CITY-ST-ZIP	1011110011 0111 111 37004	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		- nérete	5.1 TITLE		TT custride TT writings
NAME STREET ADDRESS			5.2 NAME		
1			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 City - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
44 Ibarahira	ertify that the information supplied wit	h this filing does not qualify	for the augmention stated in	Section 119.07(3)(i), Florida Statutes. I	further certify that the information
indicated	on this annual report of supplemental	annual report is true and ac-	curate and that my signatu	re shall have the same legal effect as if uired by Chapter 607, Florida Statutes; a	made under oath; that I am an
Block 12 (or Block 13 if manger, or on an attag	nment with an address.	Date of a report of left	oned by complet our, I loring dialutes, a	and the name appears in