## 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 # F96000004535

HOPPER SOLIDAY & CO., INC.

	•
	1703 OREGON PIKE PO BOX 4548 LANCASTER PA 17604-4548
	TOO OILOOM TINE
	PO BOX 4548
	LANCASTER PA 17604-4548
1	CHIONOIEH IN 17007 TOTO

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90142 027 \*\*\*150.00



Principal Place	e of Business	Mailing Address			I (##i(## icin i#iin #iici naci) daini naiti ka	(1) <b>48</b> 115 81841 \$1188 (1)	Q( 2()) (00)
1703 OREGON	PIKE	1703 OREGON PIKE					
PO BOX 4548	47004 4540	PO BOX 4548		DO NOT WRITE IN TI	DO NOT WRITE IN THIS SPACE		
LANCASTER PA 17604-4548 LANCASTER PA 17604-4548					3. Date Incorporated or Qualifed	3. Date Incorporated or Qualifed	
1					09/04/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Appli	ed For
21		26			23-2474301	<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Add		
22		City & State			Fee Requ		
City & Stat	e	City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> м. Added to 8	-	
Zip	Country		Zip Country		This corporation owes the current year	***************************************	1,000
24 25 25		<del></del>	<del>-</del>		Personal Property Tax.		
271	9. Name and Address of Curren				10. Name and Address of New Register	ed Agent	
			81	Name			
	KE, WILLIAM T		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	TOWN CENTER CIR #350			<b>V</b>			
BOC	A RATON FL 33486		83				
	The state of the s		84	City		85 Zip Co	de
	Note that the second				•	c changing its ro	gistored
office or r	egistered agent, or both, in the State	of Florida. Such change was auth	orized by	the corpora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as regis	stered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statutes				
SIGNATURE	Sharehar hand or printed name of moistered age.	t and title if applicable (NOTE: Re	aistered Ager	nt signature regi	uired when reinstating) DATE	T-111	
12.			13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12
πLE	DCP	☐ DELETE	1,1 TITLE			☐ Change	Addition
NAME	FRYER, ROBERT L JR	•	1.2 NAME				
STREET ADDRESS	30 ESHELMAN RD		1.3 STREET	TADORESS			}
CITY-ST-ZIP	LANCASTER PA 17601	· · · · · · · · · · · · · · · · · · ·	1.4 CITY-S	T-ZIP			
TITLE	DCV ·	☐ DELETÉ	2.1 TITLE			Change	Addition
NAME	BURTON, DANIEL B	,	2.2 NAME				İ
STREET ADDRESS	38 OAK HILL DR			TADORESS			
CITY-ST-ZIP	LITITZ PA 17543	☐ DELETE	2.4 CITY-S	ST-ZIP -	<del></del>	Change	Addition
TITLE	_ · · · · · · · · · · · · · · · · · · ·		3.1 TITLE				
NAME	BRENNAN, DONALD D		3.2 NAME				
STREET ADDRESS	85 ESHELMAN RD	4		TADORESS	•		
CITY-ST-ZIP TITLE	LANCASTER PA 17601	☐ DELETE	3.4. CITY-S 4.1 TITLE	51-ZiP 1		☐ Change	Addition
NAME	D :		4. 2 NAME			_ ,	_
	SHAND, JAMES			TADDRESS			
THE COUNTY OLOG BIT		4.4 CITY-S	1				
TITLE			5.1 TITLE	. 4.1		Change	Addition
NAME	KINTNER, LAWRENCE R	<del>-</del>					ţ
STREET ADDRESS			5.2 NAME	1			l l
	1			T ADORESS			
	1935 CARLTON PL			1			ľ
CITY-ST-ZIP	1	DELETE	5.3 STREE	1		☐ Change	Addition
CITY-ST-ZIP	1935 CARLTON PL	☐ DELETE	5.3 STREE 5.4 CITY-S	1		☐ Change	Addition

CITY-ST-ZIP

VOORHEES NJ

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: