## 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 # **F97000004225**

SEILER BUILDING CORPORATION

Principal Place of Business Malting Address
1268 JEFFERSON 1268 JEFFERSON
MEMPHIS TN 38104 MEMPHIS TN 38104

## FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90023 027 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

						08/12/1997		
2. Principal F	Place of Business	2a. Mailing Address	_			4. FEI Number	Ar	oplied For
21	<u> </u>					64-0807861	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	ite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional
27				·		J. Continuos di Ciciano Donico	Fee Re	equired
City & Star	te	City & State	City & State			6. Election Campaign Financing	•	May Be
23 28						Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country			8. This corporation owes the current year Int		Mr.
24	25		30			Personal Property Tax.	Yes	<b>X</b> No
	9. Name and Address of Current	Registered Agent		B1 N	Name	10. Name and Address of New Registered	Agent	
C T CORPORATION SYSTEM				ין יי	vanie			
1200 SOUTH PINE ISLAND ROAD				82 Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324								
PLAN	HAHON FL 33324		,	83				
			ļī	B4 (	City		85 Zip	Code
					-	FL		
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 it 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 re-								registered egistered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
	Signature, typed or printed name of registered agent		Registered A	igent sig	gnature required	when reinstating) DATE	ID DIDECT	DDC IN 42
12.				_		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	☐ Addition
TITLE	V			1.1 TITLE			□ Change	Addition
NAME	SEILER, DAVID R		1.2 NAM					j
STREET ADDRESS	1268 JEFFERSON		1.3 STR	EETAD	DRESS			
CITY-ST-ZIP	MEMPHIS TN 38104		_	1.4 CITY-ST-ZIP		<u> </u>		
TITLE	<b>DST</b> □ DELETE 2		2.1 TITL	2.1 TITLE			Change	Addition
NAME	SEILER, DONALD W		2.2 NAM	2.2 NAME		•		
STREET ADDRESS	1268 JEFFERSON		2.3 STREET ADDRESS		DRESS			
CITY-ST-ZIP	MEMPHIS TN 38104			2.4 CITY-ST-ZIP				
TITLE	☐ DELETE 3.1			.E	İ		Change	☐ Addition
NAME			3.2 NAM	Æ				ļ
STREET ADDRESS			3.3 STR	EET AD	DORESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-Z	(IP	, , , , , , , , , , , , , , , , , , ,		
TITLE	☐ DELETE 4		4.1 TITL	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAJ	ME				
STREET ADDRESS	;		4.3 STR	EET AD	DRESS			
CITY-ST-ZIP			4.4 CITY	r-ST-ZI	IP			
TITLE		☐ DELETE	5.1 TITL				☐ Change	☐ Addition
NAME	1		5.2 NAN	Æ				
STREET ADDRESS			5.3 STR	EETAD	DRESS			1
CITY-ST-ZIP	,		5.4 CITY			•		
TITLE		☐ DELETE	6.1 TITL	E			☐ Change	Addition
NAME		<u> </u>	6.2 NAM	Æ			-	
1			6.3 STR	EET AD	XDRESS			
STREET ADDRESS			6.4 CITY		1			
CITY-ST-ZIP	1		0.4 0111	1-01-21	"   <u> </u>			

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 copporation 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, on on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(DR/1) +CD3