## 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 Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90153 008 \*\*\*150.00

## DOCUMENT # F98000000765

API CONSULTANTS, INC.

Principal Place of Business Mailing Address						111 <b>48</b> 111 <b>88</b> 111 <b>88</b> 111 <b>88</b> 11	)) <b>(((</b> ))) ((())) (())	1 <b>101 0</b> 111 1 <b>901</b>
4529 SURREY CIRCLE 4529 SURREY CIRCLE								
MADISON WI 53		MADISON WI 53704						
				<del></del>	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qual	lited		
					02/09/1998 4. FEI Number			liad Eas
2. Principal Pl	ace of Business	2a. Mailing Address					<del></del> -	Applicable
21		Suite Apt # etc		39-1289304		\$8.75 A		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desire	ed 🔲	Fee Req	l l	
City & State		City & State	City & State		6. Election Campaign Finance		\$5.00	
<del></del>		28			Trust Fund Contribution	a, □	Added to	-
<b>Z</b> ip	Country	Zip	Country	,	8. This corporation owes the	current year Intai		
24			30		Personal Property Tax.			
9. Name and Address of Current.			20		10. Name and Address of N	ew Registered A	gent	
			81	Name 1	Posa Annance	70.0	11.15	
			82	Etroet A	Address (P.O. Box Number is Not Acc	JENK!	<u>N</u>	
10903 WHITLY COURT JACKSONVILLE FL 32246			02	Sileer	Adress (F.O. Bot Number is Not Add	septable)		]
JACKSONVILLE FL 32246			83					
				2			85 Zip C	
			84	City		FL	85 Zip C	oue
11. Pursuant to the provisions of Sections 607.050.2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or build him the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or build him the State of Florida.								egistered
office or re	egistered agent, or both in the State of familiar with, and account the coligar	nf Florida. Such change was au	khorized by	the carbo	ration's board of directors. I hereby a	accept the appoint	ment as regi	istered
	Tayling with and despite the congar	11.19	elna	uclou	L.	(iDia	Ho	1999
SIGNATURE	Signature, typed or printed in time of registered ager	t and title if applicable. (NO E: I	Registered Age	nt signature red	uired when reinstating	DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDIT ONS/CHANGES TO	OFFICERS AND		
TITLE	PCT	DELETE	1.1 TITLE				Change	☐ Addition
NAME	CAMMER, AGNES G		1,2 NAME					į
STREET ADDRESS	4529 SURREY CIRCLE		13 STREE	T ADDRESS				-
CITY+ST-ZIP	100 000 000 000 000 000 000 000 000 000		1.4 CITY-5	T-ZIP				
ππε	VSVC	☐ DELETE	2.1 TITLE		_ ^		Change	Addition
NAME	CAMMER, ROSE A	22			Rose Cammer ?	ose Cammer Jenkins		
STREET ADDRESS	4529 SURREY CIRCLE		2.3 STREE	TADORESS				
CITY-ST-ZIP	MADISON WI 53704		2. 4 CITY-	ST-ZIP	. <u></u>			
TITLE	D	□ DELETE	3.1 TITLE				Change	☐ Addition
NAME	CAMMER, GEORGE M		3.2 NAME	İ				
STREET ADDRESS	4529 SURREY CIRCLE		3.3 STREE	T ADDRESS				ļ
CITY-ST-ZIP	MADISON WI 53704	<u>-</u>	34. CITY-	ST-ZIP			<del></del> -	
TITLE		☐ DELETE	4.1 TITLE	İ			Change	Addition
NAME			4. 2 NAME					į
STREET ADDF ESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-5	T-ZIP			<del></del> -	
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDI:ESS				TADDRESS				
CITY-ST-ZIP			5.4 CITY-5	T-ZIP			<del></del> -	
TITLE		☐ DELETE	6.1 TITLE	1			☐ Change	Addition
NAME			6.2 NAME					1

14. Thereby 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 for supplements I annual report is true and accurate and that my signiture shall have the same legal effect as if made under oath; that I am an officer or director of the corpo ation or the receiver or trustee empowered to execute this report as required by Charter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ghanged, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP