

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 19, 1999 8:00 am
Secretary of State

04-19-1999 90060 017 ***150.00

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DOCUMENT # F98000000934

1. Corporation Name
PS AMERICA, INC.

Principal Place of Business
P.O. BOX 175. ONE POTTER RUN ROAD
VOLANT PA 16156

Mailing Address
P.O. BOX 175. ONE POTTER RUN ROAD
VOLANT PA 16156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/18/1998

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 PO Box 98 One Potter Run Rd

2a. Mailing Address

26 PO Box 98 One Potter Run Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Volant, PA

City & State

28 Volant, PA

Zip

24 16156

Country

25

Zip

29 16156

Country

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida 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

TITLE PD ☐ DELETE
NAME TRAWEEK, JAMES W
STREET ADDRESS 2411 COIT RD., STE 100
CITY-ST-ZIP PLANO TX

TITLE VSD ☐ DELETE
NAME MARETT, JOHN T
STREET ADDRESS ONE PLOTTER RUN ROAD
CITY-ST-ZIP VOLANT PA

TITLE VD ☐ DELETE
NAME MARETT, CRAIG R
STREET ADDRESS ONE PLOTTER RUN ROAD
CITY-ST-ZIP VOLANT PA

TITLE TD ☐ DELETE
NAME CUNNINGHAM, WALLACE
STREET ADDRESS ONE PLOTTER RUN ROAD
CITY-ST-ZIP VOLANT PA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2255 Crescent Drive
Mt. Dora, FL 32757

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P.O Box 98 One Potter Run Road
Volant, PA 16156

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

P.O. Box 98 One Potter Run Road
Volant, PA 16156

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

P.O. Box 98 One Potter Run Road
Volant, PA 16156

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: *W. A. HARRIS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99

Date

(724) 533-5055

Daytime Phone #

CR2E034 (11/98)