1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90232 008 \*\*\*150.00

**DOCUMENT # G00705** 1. Corporation Name H & J SCOTT, INC. Mailing Address Principal Place of Business 3300 S. CONGRESS AVE. 3300 S. CONGRESS AVE. **BOYNTON BEACH FL 33426** DO NOT WRITE IN THIS SPACE BOYNTON BEACH FL 33426 3. Date Incorporated or Qualifed 09/21/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2219573 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired  $\Box$ Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Country Zip This corporation owes the current year Intangible Zip □No Personal Property Tax. 30 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SCOTT, STEWART M Street Address (P.O. Box Number is Not Acceptable) 3300 S. CONGRESS AVE. 83 **BOYNTON BEACH FL 33426** Zip Code 84 City 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2F034-(11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ DELETE 1.1 TITLE TITLE 1.2 NAME SCOTT, STEWART NAME 3300 S. CONGRESS AVE., SUITE 12 1.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33426** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change 21 TITLE TITLE SCOTT, RUTH J 2.2 NAME NAME 3300 S. CONGREDD AVE., SUITE 12 2.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33426** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2099

561-733-7770

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