FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G25109

(1)

FILED Mar 17 1998 8:00am Secretary of State

1, Corporatio	TE WELDING & MACHINE	CO., INC.			
Principal Plac	e of Business	Mailing Address		T FORDIAL BRID CLUB COLUMN CLUB CONTROL BRIS BUILD	
341 H3HWY 17 P O BOX 1905 PALATKA FL 32177 P O BOX 1905 US PALATKA FL 32177				DO NOT WRITE IN THIS SPACE	
US			3. Date Incorporated or Qualified		
				02/22/1983	
2. Principal P	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		<u>58-1561614</u>	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State City & State			8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent
	OMAS, DOUGLAS R		81 Name	e	
341 HWY 17			82 Street	t Address (P.O. Box Number is Not Acceptable)	
PALATKA FL 32177					
			83		
			84 City		85 Zip Code
	10	00 1007 (500 51 11 0)		F	
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the State	oz and 607.1508, Florida Statuti e of Florida. Such change was a	es, the above-named authorized by the cor	d corporation submits this statement for the purpose orporation's board of directors. I hereby accept the a	ppointment as registered
agent. I a	ım familiar with and accept the oblig	ations of, Section 607.0505, Flo	orida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag	Alone	Control Acres Control	re required when reinstating) DATE	<u> </u>
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	THOMAS, R.E.		1.2 NAME		
STREET ADDRESS	P.O. BOX 1905 NA		1.3 STREET ADDRESS	;	
CITY-ST-ZIP	PALATKA FL		1.4 CITY - ST - ZIP	·	
TITLE	V	☐ DELET É	2.1 TITLE		Change Addition
NAME	THOMAS, JOHN E.		2.2 NAME		
STREET ADDRESS	P.O. 1676 NA		2.3 STREET ADDRESS	ş 	
CITY-ST-ZIP	BRUNSWICK GA		2. 4 CITY - ST - ZIP		
TITLE	V DIOLILO DOLLAD DILL	DELETE	3.1 TITLE		Change Addition
NAME	THOMAS, DONALD RAY		3.2 NAME		
STREET ADDRESS	RT. 6, BOX 6139		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRUNSWICK GA	· D priett	3.4. CITY-ST-ZIP		The State of the S
TITLE	THOMAS DOUGLAS DAV	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	THOMAS, DOUGLAS RAY P.O. BOX 1905		4. 2 NAME		
STREET ADDRESS	PALATKA FL		4.3 STREET ADDRESS		
CITY-ST-ZIP	PALATINA FL	☐ DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELE TE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	**	I
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP	i	
	partifu that the information supplied u	uith this bling does not qualify fo		ted in Section 119 07/3/(i) Florida Statutes I further	certify that the information

4. 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.

CR2E034 (10)