## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS FILED Aug 16, 1999 8:00 am Secretary of State

08-16-1999 90001 044 \*\*\*150.00

1 (\$500) \$500 \$150 (165) \$100 (161) \$500 (161) \$500 \$100 \$100 \$100 \$100 \$100 \$100

**DOCUMENT #** G41530 1. Corporation Name

DEMETREE	BROTHERS.	INC.
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<b>5</b> 15 -		No. 10			
Principal Plac		Mailing Address			
P.O. BOX 47050 JACKSONVILLE FL 32247-7050		P.O. BOX 47050 JACKSONVILLE FL 32247-7050			
SHCKSOMVILLE	: FL 32247-7000	DACKSONVILLE PL 324	:47-7000		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					05/31/1983
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			<b>59-2308751</b> Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & Stat	te	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip	Country	Zip	⊢—	ountry	8. This corporation owes the current year Intengible Personal Property.  Yes No
24	9. Name and Address of Current	Pagistered Agent	30	<del></del>	intangible Personal Property. Yes No  10. Name and Address of New Registered Agent
	5. Name and Address of Current	Negistered Agent	<del></del> -	81 Name	
DEM	IETREE, JACK C., JR.				
3740	D BEACH BLVD.			82 Street	et Address (P.O. Box Number is Not Acceptable)
SUIT	TE 300			83	
JAC	KSONVILLE FL 32207				
				84 City	FL 85 Zip Code
11. Pursuan	t to the provisions of sections 607 0502	and 607 1508. Florida Sta	atutes the	above-pamed	corporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State	of Florida. Such change w	as authoriz	ed by the corp	rporation's board of directors. I hereby accept the appointment as registered
•	am familiar with, and accept the obliga-	uons oi, secuoii 607.0502	, Florida Si	lalules.	}
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Regi	stered Agent signat	alure required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13	3.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	TD	DELETE	1.1	TITLE	Change Addition
NAME	DEMETREE, MARK C		1.2	NAME	];
STREET ADDRESS	3740 BEACH BLVD #300		1.3	STREET ADDRESS	s)
CITY-ST-ZIP	JACKSONVILLE, FL 00000		1.4	CITY-ST-ZIP	
TITLE	PSD	☐ DELETE	2.1	TITLE	Change Addition
NAME	DEMETREE, J. C., JR.		2.2	NAME	
STREET ADDRESS	3740 BEACH BLVD #300		2.3	STREET ADDRESS	5
CITY-ST-ZIP	JACKSONVILLE FL		2.4	CITY-ST-ZIP	
TITLE	CD	☐ DELETE	3.1	TITLE	Change Addition
NAME	DEMETREE, JACK C.		3.2	NAME	
STREET ADDRESS	3740 BEACH BLVD. #300		3.3	STREET ADDRESS	s
CITY-ST-ZIP	JACKSONVILLE FL	<del></del>	3.4	CITY-ST-ZIP	
TITLE	۷D	DELETE	4.1	TITLE	Change Addition
NAME	DEMETREE, CHRISTOPHER C.		4.2	NAME	
STREET ADDRESS	3740 BEACH BLVD #300		4.3	STREET ADDRESS	s
CITY-ST-ZIP	JACKSONVILLE FL		4.4	CITY-ST-ZIP	
TITLE	\ <b>V</b>	DELETE	5.1	TITLE	Change Addition
NAME	SCHRAMM, FRED C., JR.		5.2	NAME	
STREET ADDRESS	3740 BEACH BLVD #300		5.3	STREET ADDRESS	s

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP 6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

JACKSONVILLE FL

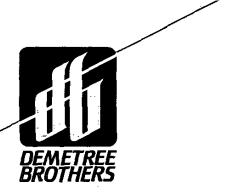
DUNN, M. HARRIS

JACKSONVILLE FL

3740 BEACH BLVD #300

DELETE

Change \_\_\_ Addition



64153D 605861-90001-44

August 10, 1999

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Demetree Brothers, Inc.

Ladies and Gentlemen:

This year, w did not receive the First Notice 1999 Corporation Annual Report this year that we usually receive in February. Please find enclosed the second notice we have completed along with a check for amount due for filing timely. We ask that the late fee by waived.

Thank you for your assistance.

Sincerely,

M. Harris Dunn

Enclosures (2)

(904) 398-7350