

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
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90064 033 ***150.00

DOCUMENT # G50545

1. Corporation Name
COTEE INDUSTRIES INC.

Principal Place of Business

% STEPHEN A. MARUSAK
6045 SHERWIN DRIVE
PORT RICHEY FL 34668

Mailing Address

% STEPHEN A. MARUSAK
6045 SHERWIN DRIVE
PORT RICHEY FL 34668

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1983

4. FEI Number

59-2602874

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 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

MARUSAK, STEPHEN A.
6128 E OAKRIDGE AVE
NEW PORT RICHEY FL 34652

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 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDF
MARUSAK, STEPHEN A.
6128 E OAKRIDGE AVE
NEW PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
MARUSAK, STELLA
6128 E OAKRIDGE AVE
NEW PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MARUSAK, FLORENCE M.
6126 E OAKRIDGE AVE
NEW PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DEMPSEY, JOSEPH M
405 EVERGLADE DR
VENICE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
WRUCHA, STANLEY JR.
1873 CAMEO WAY
CLEARWATER FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FILEPAS, GEORGE A.
5611 PLAINVIEW DRIVE
HARRISBURG PA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 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:

Stephen A. Marusak
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICEPRESIDENT

4/30/99 727-845-3737

Date Daytime Phone #

CR2E034 (1/98)

0501953