

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

DOCUMENT # **G73215**

1. Corporation Name

OSPREY SALES & SERVICE CO., INC.

Principal Place of Business

28 MAIN STREET
8075 S. BENEVA RD #6
OSPREY FL 34229
US

Mailing Address

128 MAIN STREET
8075 S. BENEVA RD #6
OSPREY FL 34229
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1983

4. FEI Number

59-2350215

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. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

ANDERSON, KENT J.
7101 S TAMiami TRAIL, SUITE A
SARASOTA FL 34231

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 **RAYMOND J. KOMAREK** *Raymond J. Komarek*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/2/99

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **KOMAREK, RAYMOND**
STREET ADDRESS **128 MAIN ST**
CITY-ST-ZIP **OSPREY, FL 00000**

TITLE **TS** ☐ DELETE

NAME **KOMAREK, NORMA L**
STREET ADDRESS **128 MAIN STREET**
CITY-ST-ZIP **OLPREY, FL 00000**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE: **RAYMOND J. KOMAREK** *Raymond J. Komarek* **7/2/99** **941-966-6667**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

G-73215
588472-90002-6
941

Osprey Sales & Service Co.

(813) 966-6667

Servicing the Metal Stamping
and Processing Industry

P.O. Box 1052
Osprey, Florida 33559

34229

To whom it may concern.

This form enclosed, 2nd notice, is the first one either my attorney, Kent Anderson, or I recieved. You will note my attorney has a "current address" and an old address since he has moved. He said he has notified the Florida Dept. of State and apparently other clients have also not recieved their forms as they were mailed to the wrong address. That address should not be in the form.

In talking to one of your agents I was told to remit a check for \$150⁰⁰, the initial fee, along with an explanation of what happened.

Please remove the 8075 S. Benewa Rd #6 from my account

Thank you for Taking care of the matter

Raymond J. Komaruk