FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H08142

DONTECH, INC.

Principal Place of Business Mailing Address										
2125 SE ERWIN RD. 2125 SE ERWIN RD.								•		
PORT ST. LUCIE FL 34952 PORT ST. LUCIE FL 34953							DO NOT WRITE IN THIS SPACE			
						3	Date Incorporated or Qualifed			
							06/15/1984			
2. Principal P	lace of Business	2a. Mailing Address		_		4	. FEI Number	Ap	plied For	
21		26					59-2443431	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					i. Certifcate of Status Desired	\$8.75 A		
22		27					. Certificate of Status Desired	Fee Re	quired	
City & State City & State							6. Election Campaign Financing	\$5.00	May Be	
23		28					Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip	Coun	try		ε	 This corporation owes the current year 		_	
24	25	29	30				Personal Property Tax.	☐ Yes	□No	
-24	9. Name and Address of Curren	t Registered Agent		₋ -		10). Name and Address of New Registe	ered Agent		
*			1	31	Name					
DONOHUE, FRANCIS T.					82 Street Address (P.O. Box Number is Not Acceptable)					
2125 SE ERWIN ROAD				Officer Address (Fig. 25) Address to Address (Fig. 25)						
POR	T ST LUCIE FL 34952		[1	33						
			<u> </u>	34	City			85 Zip (Code -	
		·	.		•			FL T		
office or r agent. 1 a	egistered agent, or both, in the State m familiar with, and accept the obligation of the state o	of Florida. Such change was autions of, Section 607.0505, Florida.	tnorized ida Statul	es.	ne corpoi	ration s i	on submits this statement for the purposon of directors. I hereby accept the a 3/30/99 or reinstating)	аррониненсая те	gistered	
12.		ID DIRECTORS	13.	-			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12	
TITLE	DP	☐ DELETÉ	1.1 TITL	E				☐ Change	Addition	
NAME	DONOHUE, FRANCIS T.		1.2 NAM	E						
STREET ADDRESS	2125 SE ERWIN RD.		1.3 STR	EET A	ADDRESS					
CITY-ST-ZIP	PORT ST. LUCIE FL		1.4 C(T)	'-ST-	ZiP					
TITLE		☐ DELETE	2.1 TITL	E	DIR	VP	Sec	Change	Addition	
NAME			2.2 NAM	Ε		AJ	oyce DoNohue SEERWIN RD			
STREET ADDRESS		<u>_</u>	2.3 STR	EET A	ADDRESS	2/2	SE ERWIN RE	, ~~ •		
CITY-ST-ZIP			2.4 CIT	Y-ST	- ZIP	Pox	et st Lune, FL 8495	2_		
TITLE		☐ DELETE	3.1 TITL	Ε .	DIR	Mic	HARL T DONOHUE	☐ Change	Addition	
NAME			3.2 NAA	1E	VP	2/2	25 SE EKWINRD		ļ	
STREET ADDRESS		•	3.3 STR	EET /	ADDRESS	Po	RT ST. Lucie, FL		ĺ	
CITY-ST-ZIP			3.4. CIT	Y-ST	-ZIP					
TITLE		☐ DELETÉ	4.1 TITL	E	DIR	VP	TREAS	Change	Addition	
NAME			4. 2 NA	νE	1	PAT	PRICIA ANN DONOHU	•	į	
STREET ADDRESS	·		4.3 STR	EET/	ADDRESS	2/	RT ST. LUCIE, FL 34	1052	1	
CITY: ST-ZIP			4.4 CIT	/-ST-	ZIP	10	(1 D), 2407 FL 34			
TITLE		. DELETE	5.1 TTT.					☐ Change	Addition	
NAME			5.2 NAM	Æ						
			5.3 STR	EET /	ADDRESS					

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 change for on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

3/30/99

561-335-7562

Change

☐ Addition