## 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 #

(2)

CENTRAL FLORIDA HOT MIX. INC.

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**FILED** Jan 29 1998 8:00am Secretary of State

J J J J J J J J J J J J J J J J J J J	The recommendation was into-									
Principal Place of Business		Mailing Address	Mailing Address					. Jidai ekski bidi		
3350 REYNOLDS RD. 3350 F		3350 REYNOLDS RD.	SEC REYNOLDS RD							
PO BOX 1823 PO BOX 1823 EATON PARK FL 33840 EATON PARK FL 33840					DO NOT WRITE IN THIS SPACE					
1						3. Date Incorporated or Qualified				
e Principal P	llogo of Business	2a. Mailing Address				09/14/1984 4. FEI Number			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		<del></del> ,	ing Address						oplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				59-2469668			ot Applicable Additional	
22		27				5. Certificate of Status Desired			equired	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28			Trust Fund Contribution			to Fees		
Žip	Zip Country		Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25	29	30			Personal Property Tax due June			_] No	
	9. Name and Address of Current	Registered Agent	8	1 Name		10. Name and Address of New Re	gistered	Agent		
1	AVY, J. W.									
1983 VISTA VIEW DR.		8	2 Street	Addres	ss (P.O. Box Number is Not Acceptal					
LAI	KELAND FL 33813		8	3						
			-	4 07					0-1-	
				4 City			FL	.     `	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.								s registered registered		
SIGNATURE								<del></del>		
	Signature, typed or printed name of registered agen OFFICERS AND			gent signature	required	when rainstating)	DATE	DIDEOTOE	201140	
IIILE	C	DELETE DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ZERO ANL	Change	Addition	
NAME	PEAVY, J.W.		1.2 NAM		V	COSC MERCHEN TOT				
STREET ADDRESS 1983 VISTA VIEW DR.			141.		ERS, MICHAEL			-		
CITY-ST-ZIP LAKELAND FL			J		50 REYNOLDS ROAD KELAND, FL 33803	-				
TITLE	PS	DELETE	2.1 TITLE			.unrii,D) 11 33003		Change	Addition	
NAME	LANIER, JOE A		2.2 NAMI	:						
STREET ADDRESS 3615 JIM KIM LANE		2.3 STRE	2.3 STREET ADDRESS					-		
CITY-ST-ZIP	LAKELAND FL		2. 4 CiTY	2. 4 CITY-ST-ZIP					i	
TITLE	V	☐ DELETE	3.1 TITLE			41.4		Change	☐ Addition	
NAME	PEAVY,JAY W.		3.2 NAMI	<u> </u>					1	
STREET ADDRESS	2140 ORANGEDALE	,	3.3 STRE	et address					Ì	
CITY - ST - ZIP	LAKELAND FL		3.4. CITY	-ST-ZIP						
TITLE	VP	DELETE	4.1 TITLE					L Change	☐ Addition	
NAME	DAVIS, JANET W		4. 2 NAM	E						
STREET ADDRESS 1982 MEADOW OAK CIRCLE		4.3 STRE	4.3 STREET ADDRESS							
CITY-ST-ZIP	POLK CITY FL	- Delete	4.4 CITY					TT 01	[] ( ) (P)	
TITLE		☐ DELETE	5.1 TITLE	ŀ				Change	Addition	
NAME			5,2 NAME							
STREET ADDRESS				et address						
CITY-ST-ZIP		DELETE	5.4 CITY-					Chanca	Addition	
TITLE		- DETELE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS				T ADDRESS						
CITY-ST-ZIP			6.4 CITY	ST-ZIP						

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.