## 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

r, corporati			<del></del>		
		7	02-17-1999 90099 011 *	130.00	
GLENN	-SHIRL, INC.			ļ	
				l ideidii fife fazio ierdi erila olizi ibai di	AN AND PRO CONTRACTOR
Principal Pla	ce of Business	Mailing Address		1 (00)014 2(15 (01)2 (01)3) 8(1)4 8(1)1 1881 81	an minit bidir didir 9.851 didir 1080
% CARL L. JO		% CARL L. JOHNSON			
1621 NE 6 AV   OCALA FL 34	· ·	1621 NE 6 AVENUE OCALA FL 34470		DO NOT WRITE IN TI	HIS SPACE
US		US		3. Date Incorporated or Qualified	TIIS SPACE
				02/13/1986	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2642722	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		S. Commente di Cizitas Besilieti	Fee Required
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes the current year     Personal Property Tax.	Intangible ☐ Yes ☐ No
27	9. Name and Address of Curren		[30]	10. Name and Address of New Registers	
			81 Name	76. Name and Adaptor of Not Rogister	
	INSON, CARL L.		82 Street Add	reco (D.O. Barrallian Indiana in New York	
162	1 NE 6 AVENUE		oz Sireel Addi	ress (P.O. Box Number is Not Acceptable)	
,	*! * <b>!!</b> 00070		83	. Por Petro Valledat	5. 21 die 1. 7 die 1
UU	ALA FL 32670		84 City	一	85 Zip Code
er Opino a_ y	Deligion state		1. 1	F	L
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the above-named com	poration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the second control of the s	of changing its registered
Sagent. Ta	am familiar with, and accept the obliga	or rionua. Such change was at		on's board of directors. I hereby accept the abo	nointment se registered
		ations of, Section 607.0505, Flor	rida Statutes.	and bear an empoter of thoropy according up	politiment as registered
SIGNATURE		ations of, Section 607.0505, Flor	rida Statutes.		pointment as registered
	Signature, typed or printed name of registered age	ations of, Section 607.0505, Flor int and title if applicable. (NOTE:	rida Statutes Registered Agent signature require	od when reinstating) } DATE	-
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered age	ations of, Section 607.0505, Florent and title if applicable.  (NOTE: ND DIRECTORS	rida Statutes Registered Agent signature require 13.	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE	Signature, typed or printed name of registered age OFFICERS AN	ations of, Section 607.0505, Flor int and title if applicable. (NOTE:	rida Statules.  Registered Agent signature require  13.  1.1 TITLE	od when reinstating) } DATE	-
12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN D JOHNSON, CARL L.	ations of, Section 607.0505, Florent and title if applicable.  (NOTE: ND DIRECTORS	rida Statules.  Registered Agent signature require  13.  1.1 TITLE  1.2 NAME	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2	ations of, Section 607.0505, Florent and title if applicable.  (NOTE: ND DIRECTORS	Registered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN D JOHNSON, CARL L.	ations of, Section 607.0505, Florent and title if applicable.  (NOTE: ND DIRECTORS	rida Statules.  Registered Agent signature require  13.  1.1 TITLE  1.2 NAME	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL	ations of, Section 607.0505, Flor	Registered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W	ations of, Section 607.0505, Flor	Registered Agent signature require  13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W	ations of, Section 607.0505, Flor	Registered Agent signature require  13.  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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE	ations of, Section 607.0505, Flor	Registered Agent signature require  13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Flor	Registered Agent signature require  13.  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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE	ations of; Section 607.0505, Flor	Registered Agent signature require  13.  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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST. FEASTER, D.G.	ations of; Section 607.0505, Flor	Registered Agent signature require  13. 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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE	ations of; Section 607.0505, Flor	Registered Agent signature require  13. 1.1 YITLE 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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE	ations of; Section 607.0505, Flor	Registered Agent signature require  13. 1.1 YITLE 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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST. FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Flor	Registered Agent signature require  13.  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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST. FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Florent and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Agent signature require  13. 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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST. FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Flor	Registered Agent signature require  13. 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	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Florent and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Agent signature require  13. 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	ad when reinstating) 1 DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Florent and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Agent signature require  13. 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	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Flor int and title if applicable. (NOTE: ND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent signature require  13.  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  5.5 TITLE  5.7 NAME  5.8 STREET ADDRESS  5.8 CITY-ST-ZIP  5.9 STREET ADDRESS  5.9 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Florent and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	Registered Agent signature require  13. 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 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of printed name of registered age OFFICERS AN D JOHNSON, CARL L. 4131 N.W. 28TH LANE #2 GAINESVILLE FL P FEASTER, T W 1621 NE 6 AVENUE OCALA FL ST FEASTER, D.G. 1621 NE 6 AVENUE OCALA FL	ations of; Section 607.0505, Flor int and title if applicable. (NOTE: ND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent signature require  13.  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  5.5 TITLE  5.7 NAME  5.8 STREET ADDRESS  5.8 CITY-ST-ZIP  5.9 STREET ADDRESS  5.9 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition

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.

6.4 CITY-ST-ZIP

SIGNATURE: \_\_\_\_\_

1-25-97

**FILED** 

Feb 17, 1999 8:00am

**Secretary of State** 

352-35-1976