## 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 # J17742

(4)

|     | F   | ILED   |        |
|-----|-----|--------|--------|
| May | 06  | 1998   | 8:00am |
| Sec | ret | ary of | State  |

| DI   | EWITT INSULATION, INC.                       | ` ,                                  |   |  | 1184 1184 1184 1184 1184 1184 1186<br>1184 1184 1184 1184 1184 1184 1186 1186 |
|--|--|--------------------------------------|---|--|---|
| Principa   | al Place of Business                         | Mailing Address                      |   | {  | BIRTH BYRK BIRK BIRTH BYRK 1841   |
| 325 DENNARD AVE   325 DENNARD AVE   PO BOX 60637   PO BOX 60637   JACKSONVILLE FL 32254   US   US   US |  |                                      | 3   | DO NOT WRITE IN TH  3. Date incorporated or Qualified  | IS SPACE  |
|  |  |                                      |   | 06/05/1986   |   |
| 2. Princ   | cipal Place of Business                      | 2a. Mailing Address                  |   | 4. FEI Number  | Applied For   |
| 21   |  | 26                                   |   | 59-2680618   | Not Applicable  |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.                  |   | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required   |
| City   | & State                                      | City & State                         |   | 6. Election Campaign Financing   | \$5.00 May Be   |
| 23   |  | 28                                   |   | Trust Fund Contribution  | Added to Fees   |
| Zip  | Country                                      | Zip                                  | Country   | 8. This corporation owes or has paid the   | current year Intangible   |
| 24   | 25   |                                      | 30  | Personal Property Tax due June 30.   | Yes No  |
|  | 9. Name and Address of Curre                 | ent Registered Agent                 |   | 10. Name and Address of New Registere  | d Agent   |
|  | MEIDE, MOSES JR.                             |                                      | B1 Name   |  |   |
|  | 817 N. MAIN ST.                              |                                      | 82 Street Addr  | ess (P.O. Box Number is Not Acceptable)  |   |
|  | JACKSONVILLE FL 32202                        |                                      |   |  |   |
|  |  |                                      | 83  |  |   |
|  |  |                                      | 84 City   |  | 85 Zip Code   |
|  |  |                                      | City  | F  |   |
| offic<br>age<br>SIGNAT   | ent. I am familiar with, and accept the obli | gations of, Section 607.0505, Flo    | ulthorized by the corporatorida Statutes.  Registered Agent signature require | poration submits this statement for the purpose ion's board of directors. I hereby accept the acceptance to the acceptance to the acceptance to the acceptance the acceptance to |   |
| 12.  |  | ND DIRECTORS                         | 13.   | ADDITIONS/CHANGES TO OFFICERS A  | ND DIRECTORS IN 12  |
| TITLE  | DP   | ☐ DELETÉ                             | 1.1 TITLE   |  | Change Addition   |
| NAME   | DEWITT, GEORGE EDWAR                         | D                                    | 1,2 NAME  |  |   |
| STREET AD  |  |                                      | 1.3 STREET ADDRESS  |  |   |
| CITY-ST-Z  |  | ·                                    | 1.4 CHTY-ST-ZIP   |  |   |
| TITLE  | D  | ☐ DELETE                             | 2.1 TITLE   |  | Change Addition   |
| NAME   | DEWITT, ARIE GWENDOLYI                       | N                                    | 2.2 NAME  |  |   |
| STREET AD  |  |                                      | 2.3 STREET ADDRESS  |  | ļ   |
| CITY-ST-2  | ORANGE PARK FL                               |                                      | 2.4 CITY-ST-ZIP   |  |   |
| TITLE  | Į.   | ☐ DELETE                             | <b>3</b>  | SECRETARY  | Change 1 Addition   |
| NAME   |  |                                      | 3.2 NAME  | GEORGE RANDALL DEWITT  |   |
| STREET AD  | i  |                                      | 3.3 STREET ADDRESS  | 834 LONGLAKE DRIVE   | 1   |
| CITY-ST-Z  | ZIP  | DELETE                               |   | JACKSONVILLE, FL 32073   | Change Laddit-  |
| TITLE  |  | F") NECELE                           | 4.1 TITLE   |  | Change Addition   |
| NAME   |  |                                      | 4, 2 NAME   |  |   |
| STREET AD  | 1  |                                      | 4.3 STREET ADDRESS  |  |   |
| CITY-ST-Z  | ZIP  | DELETE                               | 4.4 CITY-ST-ZIP<br>5.1 TITLE  |  | Change Addition   |
| TITLE  |  | occur                                |   |  | Committee (C) Prototility)  |
| NAME<br>CYDEEY AD  | enre   |                                      | 5.2 NAME  |  | ţ.  |
| STREET AD  | · ·  |                                      | 5.3 STREET ADDRESS  |  |   |
| CITY-ST-Z  | CH*  | DELETE                               | 5.4 CITY - ST - ZIP<br>6.1 TITLE  |  | Change Addition   |
| NAME   | ì  | □ occent                             | 6.2 NAME  |  | Caronido Caroniloli   |
| STREET AD  | Notice                                       |                                      | 6.3 STREET ADDRESS  |  | 1   |
|  |  |                                      |   |  |   |
| CITY-ST-Z  |  | with this filing does not qualify fo | 6.4 CITY-ST-ZIP   | Section 110 07/3/ii) Florida Statutes I further  | cortify that the information  |

I nereby 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 frustee 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.