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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # J48097

(6)

DUVAL SEPTIC TANK COMPANY

Principal Place of Business

Mailing Address

% DAVID C. NELDNER

% DAVID C. NELDNER

FILED Apr 26 1996 8:00 am Secretary of State

- 1 188/1740 BIJJ BIBBJ 78718 BEJJB JBJBI IBBI BJBJ7 BIBII BJBJ8 BJBJ7 BIBI4 BIBI4 BIBI4					
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5340 SOUTEL DRIVE, P.O. BOX 9575 JACKSONVILLE FL 32208-7575 2. Principal Place of Business		5340 SOUTEL DRIVE. P.O. BOX 9575 JACKSONVILLE FL 32208-7575			3. Date incorporated or Qualified 12/19/1986	3a. Date of Last Report 04/05/1995		
1	ace of Business	2a. Mailing Address			4. FEI Number	·	7,00,	Applied For
21 26					59-2758534		<u> </u>	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired			.75 Additional ee Required
City & State	·	City & State			Election Campaign Financing Trust Fund Contribution		\$5	5.00 May Be
Zip	Country	Zip	Cour	try	8. This corporation has liability for in	ntangible ta		
24	25	29	30		Florida Statutes Yes	□ No		
	g. Name and Address of Curre	nt Hegistered Agent		B1 Name	10. Name and Address of New Re	gistered	Agent	
NE DN	TO DAURD O		["	B1 Name				
	ER, DAVID C.		J.	Street Add	ress (P.O. Box Number is Not Acceptable	9)		
	Dutel dr Diville fl 32208		ļ.	33				
JACKSU	MVILLE FL 32208		ľ	23				
			Ī	34 City			85	Zip Code
11. Pursuant to	o the provisions of Sections 607 0502	and 607 1508. Florida Statu	ites the above	o papied corpor	ration submits this statement for the purp	<u>FL</u>	البل	
	ed acent, or both, in the State of Flori h, and accept the obligations of, Sect			prporation's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ose or cha intment as	nging registe	its registered office red agent. I am
SIGNATURE _	Signature typed or printed harne of registered agent	and fice if applicable. (N	IOTE: Registered A	gent signature require	ril when reinstation	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFIC		DIREC	TORS IN 12
TITLE	Р	☐ DELETE	1. 1 717	.ŧ			Chan	
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CITY-ST-ZIP	JACKSONVILLE FL							
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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 3 if changed, or on an attachment with an address.

SIGNATURE: 6