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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

JOE VON WALDNER BONDING, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address **S JOSEPH K. VON WALDNER** % JOSEPH K. VON WALDNER 2911-A W. 39TH ST 2911-A W. 39TH ST DO NOT WRITE IN THIS SPACE ORLANDO FL 32839-8698 ORLANDO FL 32839-8698 3. Date Incorporated or Qualified 04/10/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2940289 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name VON WALDNER, JOSEPH K. 2911-A W. 39TH ST Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32809 ВЗ 84 City Zip 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. Signature, typod or printed name of registerest against and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition VON WALDNER, JOSEPH A. MALAF 1.2 NAME 2911-A W. 39TH ST STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE VON WALDNER, LYNN A. NAME 2.2 NAME 2911-A W. 39TH ST STREET ADDRESS 2.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE 3.1 TITLE Change Addition TITLE VON WALDNER, JOSEPH K. NAME 3.2 NAME 2911-A W. 39TH ST STREET ADDRESS 3.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TRUE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DILETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST-ZIP 14. Thereby certify that the information supplied with this fiting 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 emptywered 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 attrictment with an address.