Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K80557

1. Corporation Name

Principal Place of Business

JOE VON WALDNER BONDING, INC.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90068 015 ***150.00



% JOSEPH K. VON WALDNER 2911-A W. 39TH ST ORLANDO FL 32839-8698 2. Principal Place of Business 21 Suite, Apt. #, etc. 22		% JOSEPH K. VON WALDNER 2911-A W. 39TH ST ORLANDO FL 32839-8698 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/10/1989 4. FEI Number 59-2940289 5. Certificate of Status Desired \$8.75 Additional Fee Required			
⊢ • · · · · · · · · · · · · · · · · · ·					6. Election Campaign Financing Trust Fund Contribution		May Be
7in	Country	Zip	Coun	trv	This corporation owes the current		d to rees
Zip	25	<u></u>	30	,	Personal Property Tax.		
25 29 30					10. Name and Address of New Re	gistered Agent	
	o, Halilo alto Haditod di Galila.			31 Name			
von Waldner, Joseph K.					(2.2.)		
2911-A W. 39TH ST				32 Street Ad	dress (P.O. Box Number is Not Acceptab	ле)	l
ORLANDO FL 32809			-	B3			
			- (B4 City		FL [85] Zi	p Code
44	the provisions of Sections 607 050	2 and 607 1508 Florida Statute	s the ah	ove-named co	reporation submits this statement for the p	ournose of changing	its registered
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	Signature, typed or printed name of registered agen	A Little if continue to	Pagietorod I	gent signature regu	uired when reinstating)	- DATE	 -
12.		D DIRECTORS	13.	gon agriculture requ	ADDITIONS/CHANGES TO OFF		TORS IN 12
TITLE	DP OF THE PART	☐ DELETE	1.1 TIT	E		☐ Chang	
NAME	VON WALDNER, JOSEPH A.	<u> </u>	1.2 NA				
i - I	2911-A W. 39TH ST			EET ADDRESS			J
STREET ADDRESS			-ST-ZIP			j	
CITY-ST-ZIP	ORLANDO FL	□ DELETE	DELETE 2.1 TIT			[] Chang	e
TITLE	DST WALDNED LYNN A						
NAME	VON WALDNER, LYNN A.		2.2 NA				
STREET ADDRESS	2911-A W. 39TH ST			EET ADORESS			
CITY-ST-ZIP	ORLANDO FL			Y-ST-ZIP	, , <u>, , , , , , , , , , , , , , , , , </u>	Chang	e Addition
TITLE	DY		3.1 TITI			□ Cilang	- Liverinon
NAME	VON WALDNER, JOSEPH K.		3.2 NA				
STREET ADDRESS	2011741110011101		3.3 \$TF	EET ADORESS			
CITY-ST-ZIP	ORLANDO FL		_	Y-ST-ZIP			a [**] Addition
TITLE		☐ DELETE	4.1 TITI			Chang	e 🛅 Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STF	EET ADDRESS			{
CITY-ST-ZIP			_	Y-ST-ZIP	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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NAME			5.2 NAI	1E			1
STREET ADDRESS			5.3 ST	EET ADDRESS			-
CITY-ST-ZIP			5.4 CIT	r-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		
TITLE		☐ DELETE	6.1 TITI	E		Chang	e
NAME			62 NA	ME			
STREET ADDRESS			6.3 ST	EET ADDRESS			ļ
CITY OF 7ID			6.4 CIT	Y-ST-ZIP			

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 of Block 13 if champed, or organizationment with an address, with all other like empowered.