FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K82403

Dringinal Place of Business

DON FOLKER & SON, INC.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90143 034 ***150.00

rillicipal riace	a or business	Maining Madress			
% DONALD L. FOLKER. SR.					
2231 BRIAN AVENUE 2231		2231 BRIAN AVENUE			DO NOT WRITE IN THIS SPACE
SOUTH DAYTONA FL 32119		SOUTH DAYTONA FL 32119			3. Date Incorporated or Qualifed
					04/20/1989
. 57	(Darker)	Do Mailing Address			4. FEI Number Applied For
— '	2. Principal Place of Business 2a. Mailing Address				1
21	20		•		59-2943409 [Not Applicable \$8.75 Additional
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required	
22 27					
City & State		⊢ , `	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
28					
Zip	Country Zip		Country	<i>'</i>	8. This corporation owes the current year Intangible Personal Property Tax.
24	25 29 30		<u> </u>		
	9. Name and Address of Currer	nt Registered Agent	81	NI	10. Name and Address of New Registered Agent
=	,		01	Name	
FOLKER, DONALD L., SR.			82	Street Add	ress (P.O. Box Number is Not Acceptable)
	BRIAN AVENUE			<u>L.</u>	
S. D.	AYTONA FL 32119		83		
			84	City	85 Zip Code
				City	FL S Z S S S S S S S S
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florida	Statutes	5.	ion's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age			nt signature requir	red when reinstating) DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	j D	☐ DELETÉ	1.1 TITLE		
NAME	FOLKER, DONALD L., SR.	1.2 N/		}	
STREET ADDRESS	2231 BRIAN AVENUE		1.3 STREE	TADORESS	
CITY-ST-ZIP	S. DAYTONA FL 32119		1.4 CITY-5	ST-ZIP	
TITLE ·	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	FOLKER, DONALD L., JR.	R. 22 N			
STREET ADDRESS			2.3 STREE	TADDRESS	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	ادین است. ادین است. است. است. است. است. است. است. است.
TITLE			3.1 TITLE		☐ Change ☐ Addition
NAME	FOLKER, DOROTHY D.		3.2 NAME		
STREET ADDRESS			3.3 STREE	T ADDRESS	
CITY-ST-ZIP	ZZOI DIIMI MENOL		3.4. CITY-	•	
TITLE	J. JATIOINA CE	DELETE 4.1			☐ Change ☐ Addition
NAME	}		4. 2 NAME	.	
				T ADDRESS	
STREET ADDRESS	1				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-1		☐ Change ☐ Addition
TITLE		C OFFEIG	5.1 TILE 5.2 NAME		
NAME					•
STREET ADDRESS	(T ADDRESS	
CITY-ST-ZIP		Don exc	5.4 CITY-S 6.1 TITLE	S1-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	ĺ		☐ Change ☐ Addition
NAME	<u> </u>		6.2 NAME		
STREET ADDRESS	3			T ADDRESS	
CITY_ST_7IP			6.4 CITY-3	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 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: