

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90068 007 ***150.00

DOCUMENT # L01400

1. Corporation Name
THE SYDGAN CORPORATION



Principal Place of Business
314 HANNIBL SELANE EAST
#B
WINTER PARK FL 32789
US

Mailing Address
P.O. BOX 350
WINTER PARK FL 32790-0350
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/12/1989

4. FEI Number

59-2958267

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 425 W. NEW ENGLAND AV

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 300

City & State

23 WINTER PARK, FL

Zip

24 32789

Country

25 US

Zip

29

Country

30

9. Name and Address of Current Registered Agent

BELLOWS, DANIEL B.
314 HANNIBL SELANE EAST
STE 100
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name
DANIEL B. BELLOWS

82 Street Address (P.O. Box Number is Not Acceptable)
425 W. NEW ENGLAND AVE

83 Suite 300

84 City
WINTER PARK

FL

85 Zip Code
32789

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 DANIEL B. BELLOWS 1/19/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~DPST~~ ☒ DELETE
NAME ~~BELLOWS, BOBETTE H.~~
STREET ADDRESS ~~941 GORGIA AVE~~
CITY-ST-ZIP ~~WINTER PARK FL 32789~~

TITLE V ☐ DELETE
NAME GIERKE, ROBERT T.
STREET ADDRESS 3599 MIDIRON DR.
CITY-ST-ZIP WINTER PARK FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, P, S, T
1.2 NAME DANIEL B. BELLOWS
1.3 STREET ADDRESS 941 GORGIA AVE
1.4 CITY-ST-ZIP WINTER PARK, FL 32789

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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: DANIEL B. BELLOWS PRES 1/19/99 407-644-3151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)