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

CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

101

	YE BUILDING AND CO					
Principal Place of Business		Mailing Address	Mailing Address			1812 B1811 B1811 B1811 B1612 1881
13434 MOHAWK ROAD 13434 MOHAWK ROAD		C/O DOUG STUDER 13434 MOHAWK RD				
				DO NOT WRITE IN THIS SPACE		
CLERMONT FL 34711 US		CLERMONT FL 34711 US		3. Date Incorporated or Qualified		
		00			07/27/1989	
2. Principat Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26	-		59-2959088	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	City & State			Fee Required
23		·	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip			Country	/	8. This corporation owes or has paid the	·
24	25	29	30		Personal Property Tax due June 30.	Yes No
ļ	9. Name and Address of C	urrent Registered Agent		T	10. Name and Address of New Registers	d Agent
	/EENEY, DON		81	Name		
BUCKEYE BUILDING			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
13434 MOHAWK RD. Clermont Fl Fl 34711			83			
, U	CRMONI PL PL 34/11					
			84	City	F	85 Zip Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the im familiar with, and accept the Signature, typed or prodest rame of region	obligations of, Section 607.0505, Fig	orida Statute:	S .	corporation submits this statement for the purpose pration's board of directors. I hereby accept the a equired when reinstating)	
12.			13.	,1	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME	·		1.1 TITLE			Change Addition
STREET ADDRESS	Acce bridge book		1.2 NAME 1.3 STREET	. YDD0166		
CITY-ST-ZIP	SPIGE OIL 10100		1.4 CiTY - S		•	
TITLE	1	☐ DELETE	2.1 TITLE			Change Addition
NAME	STUDER, DOUGLAS J		2.2 NAME			
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		2.3 STREFT	ADDRESS		
CITY-ST-ZIP	CLERMONT FL		2. 4 CITY-	ST - ZIP		
TITLE NAME	\$ \$ Tuder, douglas j	DELETE 3.1				Change Addition
STREET ADDRESS	13434 MOHAWK RD		3.2 NAME 3.3 STREET	ADDRESS		
CITY-ST-ZIP	CLERMONT FL		3.4. CITY-5			
TITLE	VP	DELETE	4.1 TITLE	31-71		Change Addition
NAME	SWEENEY, DON		4 2 NAME			- -
STREET ADDRESS	13434 MOHAWK RD		4 3 STREET	ADDRESS		
CITY-ST-ZIP	<u>Cl</u> ermont fl		4.4 CITY-S	IT-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS	1		5.3 STREET			
CITY-ST-ZIP TITLE			5.4 CITY - S 6.1 TITLE	T - Z(P		Change Addition
NAME			6.2 NAME			FT Outside FT Vanified)
STREET ADDRESS			6.3 STREET	ADDRESS		
		6.4 CITY - S				
						_ -

I hereby certify that the information supplied with this filing ribes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual report or supply centel armual region 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 trusty 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 the glock ment with an address.

FILED

Jun 11 1998 8:00am

Secretary of State