☐ Addition

☐ Change

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90141 045 \*\*\*150.00

## 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

## OCUMENT# I

1. Corporation	Name # <b>L4589</b> (	)						
DENNIS	KNAUER & SONS, INC.		•					
Principal Place	e of Business	Mailing Add	Iress	· · · ·	<del>-</del>		<b>DIL 1110</b> 13 83811 1	Tible Blair Ions
2608 BRIANHOL		2608 BRIANI	HOLLY DRIVE					
VALRICO FL 33594 VALRICO FL 33594							00405	
						DO NOT WRITE IN THIS  3. Date Incorporated or Qualifed	SPACE	
	•					01/29/1990		ļ
		A Marifesta	8			4. FEI Number	Δ,	oplied For
_	lace of Business	<u> </u>	Address			62-1427526	<u> </u>	ot Applicable
21		26 Suite A	pt. #, etc.	-		02-142/320	\$8.75	
Suite, Apt.	#, etc.	27	pr. #, etc.			5, Certifcate of Status Desired	Fee Re	1
22 City & Stat		City & 5	State		· · · · · ·	6. Election Campaign Financing	\$5.00	May Be
City & State	<del>u</del> ,	28	-		,	Trust Fund Contribution		to Fees
<b>Zip</b> -	Country	Zíp		Count	try	8. This corporation owes the current year Interest.	angible	
24	25	29	[3	30	•	Personal Property Tax.	Yes	□No
	9. Name and Address of Curro			<u> </u>		10. Name and Address of New Registered	Agent	
				1	Name			
ROL	LINS, JACK			Į,	30 Ot4 A	ddress (P.O. Box Number is Not Acceptable)		
4008 GREENMARK LANE				1,	32 Street A	ddress (P.O. Box Number is Not Acceptable)		. !
VALF	RICO FL 33594			1	B3			
				L			<del></del>	
				1	B4 City	FL	85 Zip	Code
		-00 607 4500	Elevido Otobuto	a tha ab	ove pamed c	amountion submits this statement for the purpose of	changing its	registered
office or r	paintered agent or both in the Stat	e of Fiorida Such	change was all	inonzeo i	ov ine corbor	ration's board of directors. I hereby accept the appoi	ntment as re	gistered
agent. I a	m familiar with, and accept the oblig	gations of, Section	607.0505, Flori	da Statut	es.			
SIGNATURE			MOTE: F	Dunlatared A	and signature con	quired when reinstating) DATE		
	Signature, typed or printed name of registered a	AND DIRECTORS	(NOTE: F	13.	geni aignature sec	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
12.	PD	THE BITTE OF TOTAL	DELETE	1,1 TUL	F.	ADDITIONAL PROPERTY.	☐ Change	☐ Addition
	KNAUER, DENNIS W.			1,2 NAM				ļ
NAME	2608 BRIAN HOLLY DR.				EET ADDRESS			
STREET ADDRESS			1		Į.			
CITY-ST-ZIP	VALRICO FL	-	DELETE	2.1 TITL	/-ST-ZIP		☐ Change	☐ Addition
TITLE	VD		Doctore	2.2 NAM			-	
NAME	KNAUER, ANN M.			1				
STREET ADDRESS	2608 BRIAN HOLLY DR.				EET ADDRESS			
CITY-ST-ZIP	VALRICO FL		DELETE	_	Y-ST-ZIP		☐ Change	Addition
TITLE			OFFE :	3.1 TTL		الله الله الله الله الله الله الله الله		
NAME				3.2 NAA				
STREET ADDRESS				3.3 STR	EET ADDRESS			
CITY-ST-ZIP			[] DELETE	_	Y-ST-ZIP		Change	Addition
TITLE			DELETE	4.1 TITL			\$go	
NAME				4. 2 NA				
STREET ADDRESS					REET ADDRESS			
CITY-ST-ZIP			<del></del>	_	Y-ST-ZIP		☐ Change	Addition
TITLE			☐ DELETÉ	5.1 TITL			спапуе	☐ vorigon
NAME	1			5.2 NAM				
STREET ADDRESS	J			5.3 STR	REET ADDRESS			

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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

N. Knaver Pd.