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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L70684

(0)

FILED
Jan 21 1998 8:00am
Secretary of State

	GRADING SERVICE, INC.	(0)			
Principal Plac		Mailing Address			6.5 6.5 6.5 6.5 6.5 6.5
16398 JOMAR ROAD 16398 JOMAR ROAD SARASOTA FL 34240 SARASOTA FL 34240					
US		US		DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
6 Date de al D	la Cal David	T. 4 - 74 - 17 - 1 - 1 - 1		05/01/1990	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# alc	26 Suite, Apt. #, etc.	·	65-0211028	Not Applicable
22	«, oto.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	B	City & State	,	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes or has paid th	e current year Intangible
24	25	29	30	Personal Property Tax due June 30.	☐ Yes 🔽 No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registe	ered Agent
	DGETT, JAMES		81 Name		
	398 JOMAR ROAD		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SA	RASOTA FL 34240				
			83		
			84 City		85 Zip Code
44 0	to the annulation of Continue COT O	500 and 607 1500 Flacida State			FL S Z P C C C C C C C C C C C C C C C C C C
office or r	o the provisions of sections 607.05 egistered agent, or both, in the Sta	ite of Florida. Such change was	ies, the above-hamed corp authorized by the corpora	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of changing its registered e appointment as registered
agent. I a	m familiar with, and accept the obl	igations of, Section 607.0505, FI	orida Statutes.		, .
SIGNATURE	Signature, typed or printed name of registered a	according title if exchanges (NO)	E: Registered Agent signature requi	red when related a	ATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	· · · · · · · · · · · · · · · · · · ·
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	BADGETT, JAMES R		1.2 NAME		-
STREET ADDRESS	16398 JOMAR ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34240		1.4 CITY - ST - ZIP		
TITLE	ŚT	DELETE	2.1 TITLE		Change Addition
NAME	BADGETT, PATRICIA		2.2 NAME		
STREET ADDRESS	16398 JOMAR ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34240		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	•	
STREET ADDRESS			3.3 STREE1 ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	. 4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change 1 44255-11
TITLE		רו חנונונ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		;
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
ŀ					□ Audulion
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		The Mark President Community of the Mark President Community of the Commun	6.4 CITY - ST - ZIP	Section 119 07/3/(i) Florida Statutes I furth	

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 of 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 frustee 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.

NONATURE / A. A. B. / - 5 - 5 RANGET Dec 1-8-98 941-321-0215