

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **M71100**

1. Corporation Name
ETCHLIKE, INC.

Principal Place of Business

% TIM BOVE
208 E. MAGNOLIA ST.
DAVENPORT FL 33837

Mailing Address

% TIM BOVE
208 E. MAGNOLIA ST.
DAVENPORT FL 33837

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 AUG 31 AM 8:56



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1988

4. FEI Number

59-2886290

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.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

BOVE, TIM
208 E. MAGNOLIA ST.
DAVENPORT FL 33837

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

10. Name and Address of New Registered Agent

400002977214-8

-09/02/99-01069-017

*****150.00**

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

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 ☐ DELETE

NAME
BOVE, TIM
STREET ADDRESS
208 E. MAGNOLIA ST.
CITY-STATE-ZIP
DAVENPORT FL 33837

TITLE ☐ DELETE

NAME
JOY, STEPHEN
STREET ADDRESS
1805 CHERRY RIDGE LN.
CITY-STATE-ZIP
BRANDON FL 33511

TITLE ☐ DELETE

NAME
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NAME
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CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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.

SIGNATURE: *[Signature]*

7/7/99 941-647-3930

CR2E034 (5/99)

ETCHLIKE INCORPORATED
5925 IMPERIAL PARKWAY, STE 115
MULBERRY, FLORIDA 33806
Ph: (941) 647-3930, Fax: (941) 647-2097

July 7, 1999

Annual Report Filings
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: FEI # 59-2886290

To Whom It May Concern:

We have just received a copy of the second notice of the annual filing form and are horrified that we did not receive the first notice. As you can clearly see by the copy attached, we are not receiving some of our legal documents due to the Davenport Post Office returning the mail because the post office box is not listed on the address.

The problem is that because we are a tiny company, the president, Timothy A. Bove, has the corporate address at his home address. He recently moved from Lake Wales to Davenport. The Davenport Post Office did not deliver to residences, which we were unaware of, but set up post office boxes for their residents. Just recently, they have agreed to deliver to home mailboxes.

We do have a physical office location, but this is not listed as our corporate address. Therefore, we have not been receiving our corporate mail.

I am enclosing the filing fee of \$550.00, which includes the \$400.00 late charge. We sincerely hope that you will make an allowance and reimburse the late fee to us because it is due to circumstances beyond our control.

Mr. Bove has talked with the Davenport Post Office staff and the situation should be resolved for future mailings.

Sincerely,


Jean Joy
Manager