## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N9700000747

1. Corporation Name

ANCLOTE CORP.

Principal Place of Business

355 ANCLOTE ROAD TARPON SPRINGS FL 34689 Mailing Address

355 ANCLOTE ROAD TARPON SPRINGS FL 34689

## **FILED** Feb 24, 1999 8:00 am § Secretary of State

02-24-1999 90175 033 \*\*\*\*61.25



2. Principal P	cipal Place of Business 2a. Mailing Address 26				3. Date Incorporated or Qualifed 02/10/1997	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			4. FEI Number Applied For	
22		27			59-3433009 Not Applicable	
City & Stat	e	City & State			\$8.75 Additional	
23		28			5. Certificate of Status Desired Fee Required	
Zip	Country	Zip	Cour	ntry	6. Election Campaign Financing \$5.00 May Be	
24	25	29 3	0		Trust Fund Contribution Added to Fees	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
				81 Name	TO TO PE	
- LINEMPENY - CEOPOE - ID.			-	George E. Huff  82 Street Address (P.O. Box Number is Not Acceptable)		
L'HEUREUX, GEORGE JR				1227 Carson Lane		
<del>448 VEGAS DR -</del> T <del>ARPON SPRINGS FL 34689</del> -				83		
TARPOIN	SPRINGS TE 04009		ļ		100 To Out	
		•		84 City	rpon Springs, FL 85 34689	
44 Secretary States of Sections 617 1503 and 617 1503 Elevido States the above named comporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida, Such change was allinorized by the corporation's board of unectors, i neterly accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 61/0503, Florida Statutes.						
SIGNATURE	Signature, typed or printed pame of registered agent at	and title if Afolicable (NOTE: 8)	egistered /	Agent signature	required when reinstating)  DATE	
12.	OFFICERS AND		13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	X DELETE	1.1 1111		Change □ Addition	
NAME	-L'HEUREUX, GEORGE JR	r	1.2 NA	ME {(i)}	Huff, George E.	
STREET ADDRESS	448 VEGAS DR			REET ADDRESS	1227 Carson Lane	
CITY-ST-ZIP	TARPON SPRINGS FL 34689		1.4 CIT	Y-ST-ZIP	Tarpon Springs, FL 34689	
TITLE	SD	☐ DELETE	2.1 TIT		☐ Change ☐ Addition	
NAME	BRADFORD, GRETCHEN		2.2 NA	ME		
STREET ADDRESS			2.3 STI	REET ADDRESS	s	
CITY-ST-ZIP	TARPON SPRINGS FL 34689		2.4 CI	TY-ST-ZIP		
TITLE	VD	<b>★</b> DELETE		ue VD	Change Addition	
NAME	-DOLL, BARBARA	ŗ	3.2 NA	ME	Jackson, Lois	
STREET ADDRESS			3.3 STI	REET ADDRESS	475 Outer Drive	
CITY-ST-ZIP	TARPON SPRINGS FL 34689			TY-ST-ZIP	Tarpon Springs, FL 34689	
TITLE	TD	☐ DELETE	4.1 TIT		☐ Change ☐ Addition	
NAME	DIETRICH, BEVERLY		4. 2 NA	ME		
STREET ADDRESS			4.3 STI	REET ADDRESS	s	
CITY-ST-ZIP	TARPON SPRINGS FL 34689		4,4 CIT	Y-ST-ZIP		
TITLE	D	☐ DELETE	5.1 111		☐ Change ☐ Addition	
NAME	CHAMPION, RACHEL		5.2 NA	ME		
STREET ADDRESS			5.3 STI	REET ADDRESS	s	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	,	5.4 CIT	Y-ST-ZIP		
TITLE	D	TA.DELETE	6.1 TIT	LE J	Ta Bookallo Biokand Addition	
NAME	CHARTIER, WILFRED	/	6.2 NA	ME	LaRochelle, Richard	
STREET ADDRESS	486 LINGER LN		6.3 ST	REET ADORESS	439 Outer Drive	
UTINEET AUDINESS	TARROLL ORDINAC EL GAGO		G A CIT	V 6T 7ID	Tarpon Springs, FL 34689	

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 617, 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.

Feb. 15, 1999

727-937-1565