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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 

01-22-1999 90088 016 \*\*\*150.00

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **1999** : DOCUMENT # **P92000008331**

Principal Place of Business

BIRCH PROPERTIES, INC.

GUESS, J.F.SR

GUESS, J F JR

Urran 1

222 BIRCH LANE

LAKELAND FL 33803

222 BIRCH LANE

LAKELAND FL 33803

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

222 BIRCH LANE 222 BIRCH LANE LAKELAND FL 33803 LAKELAND FL 33803 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/01/1992 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3152315 21 26 \$8.75 Additional Suite, Apt, #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Zip Zip Country Personal Property Tax. 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GUESS, J. FRED SR. 222 BIRCH LANE Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33813 83 Zip Code 85 84 City 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 (NOTE: Registered Agent signature required when reinstating): Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change DELETE 1.1 TITLE TITLE

DELETE

CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE GUESS, VALDA L 3.2 NAME NAME 222 BIRCH LANE 3.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33803 3.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 4.1 TITLE ΠILE GUESS, GRACE A 4. 2 NAME NAME - A July 12 222 BIRCH LANE 4.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME GUESS, SYLVIA M NAME 5.3 STREET ADDRESS 222 BIRCH LANE STREET ADORESS 5.4 CITY-ST-ZIP LAKELAND FL CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition □ DELETE TITLE 2.0 for 0.1. 6.2 NAME NAME

12 NAME

2.1 TITLE

2.2 NAME

1.3 STREET ADDRESS

2.3 STREET ADDRESS

2. 4 CITY-ST-ZIP

1.4 CITY-ST-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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Change

(11/98)CR2E034 ☐ Addition

Applied For

Not Applicable

T No