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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90017 025 ***150.00

DOCUMENT # P93000021042

1. Corporation Name

PACKER CONSULTING, INC.

4481	SW	1015	ST C	R.	
GAIN	ESVI	LLE	FL :	3260	8

Principal Place of Business

Mailing Address



4481 SW 101ST DR. GAINESVILLE FL 32608 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 03/16/1993 OF MARCH 1, 1499 2a. Mailing Address 4. FEI Number Applied For Principal Place of Business 10303 SW 48TH PLACE 26 10303 SW 48TH PLACE 59-3171640 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required GAINELVILLE, FL 32608 GAINESVILLE City & State City & State 6. Election Campaign Financing \$5.00 May Be 32608 Added to Fees 32608 HLACHUT Trust Fund Contribution ALACHUM Zip Country Country 8. This corporation owes the current year Intangible 25 Personal Property Tax. 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PACKER, EDWARD T 82 Street Address (P.O. Box Number is Not Acceptable) 4481 SW 101ST DR. GAINESVILLE FL 32605 83 84 85 Zip Code 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. DATE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE PACKER, EDWARD T 12 NAME NAME 4481 SW 101ST DR. 1.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32605 14 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition Change □ DELETE 2.1 TITLE TITLE PACKER, KATHERINE H 22 NAME NAME 4481 SW 101ST DR. 2.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32605 2. 4 CITY-ST-ZIP CITY-ST-ZIE ☐ Addition ☐ DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Change □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Addition ☐ DELETE TITLE 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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.

CR2E034 (11/98)