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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000033571 (9)

## **FILED** May 01 1998 8:00am Secretary of State

DONALDSON, INC.										. 14 <b>114</b> (1141 4) (1	. <b>200</b> : 610: 250:	
Principal Place of Business Mailing Address									T TO BEHAUSE FIRE COLORD TALLIC MODILE MODILE OUTSE DUSIN	I INOU ALEBA URALA	10001 IIUI (001	
219 S FIFTH ST 219 S FIFTH ST												
JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL					FL 32250	32250			DO NOT WRITE IN TH	C CDACE		
									DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
									05/10/1993			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		Applied For	
21				26					<b>59-3180439</b> Not Applicable			
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional	
22				27					or believed of blance bounds		Pequired	
City & State				City & State					6. Election Campaign Financing		May Be	
Zip	Country		Zip Cou			untry			Trust Fund Contribution			
24		25				, odnis,			B. This corporation owes or has paid the in Personal Property Tax due June 30.		ntangible	
<u> </u>	9. Name	and Address of Current	29 Regis	tered Agent	30	Т	<del></del>		10. Name and Address of New Registere			
		I, ALBERTA J				81	Name					
219 & FIFTH ST						82	C11	A al al a a	one (D.O. Roy Mumbor in Not Accontable)			
JACKSONVILLE BEACH FL 32250							Street	Addres	ss (P.O. Box Number is Not Acceptable)			
_						83						
						84	City			OE 7ir	Code	
						"	City		F	<b>L</b>  85   Zip	Code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth							e-named	corpo	ration submits this statement for the purpose	of changing	its registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											is registered	
SIGNATURE												
12.	Signature, typed	or printed name of registered agent OF FICERS AND			Registere		nt signature	required	ADDITIONS/CHANGES TO OFFICERS A		DE IN 12	
TITLE	TD	OF TOUTS AND	i zirii. C	DELETE	1.1.1		Т		ADDITIONS/OFFANGES TO OFFICEAS A	Change		
NAME	1	DSON, ALBERTA J		<b>_</b>		AME						
STREET ADDRESS 219 S FIFTH ST							ADDRESS					
CITY-ST-ZIP JACKSONVILLE BEACH FL 32			250			1.4 CITY-ST-ZIP						
TITLE	PD			DELETE	211	ITLE				Change	Addition	
NAME	DONAL	.dson, cecil e			2.2 N	IAME	ł					
STREET ADDRESS		ANDUSKY AVE E			2.3 9	STREET	ADDRESS				1	
CITY-ST-ZIP JACKSONVILLE FL 32216						2. 4 CITY-ST-ZIP						
TITLE	SD			DELETE	3.1 T	ITLE	ŀ			☐ Change	☐ Addition	
NAME	DARVILLE, BARBARA D			3.21								
STREET ADDRESS					3.3 5	TREET	ADDRESS				}	
CITY-ST-ZIP		ONVILLE FL 32216		T DELETE	_	CITY-S	IT-ZIP				1.10	
TITLE	DOUGLIG	TIMOTHY		L DELETE	4.1 1					L Change	☐ Addition	
NAME OTREET ADDRESS		S, TIMOTHY IAFFORD LANE				NAME	10 ppg					
STREET ADDRESS		ONVILLE FL					ADDRESS					
CITY-ST-ZIP TITLE	D	ONVILLE FL		DELETE	_	ITY-S	1 - Z(P			Change	☐ Addition	
NAME		S, SHARON		P. DECEIE	5.1 T	IAME				Onange	raddition	
STREET ADDRESS	000911	AFFORD LANE					ADORESS				1	
CITY-ST-ZIP		ONVILLE FL				ITY-\$1					1	
TITLE	-,,,,,,,,			DELETE	6.1 T		. (1)			Change	Addition	
NAME				<del></del>		IAME						
STREET ADDRESS	;				1		ADDRESS					
CITY-ST-ZIP						ATY-SI						
4.4		- 1-1-1-1 - 1-1-1-1-1-1-1-1-1-1-1-1-1-1	43.10						*****			

Thereby 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 trusted empowered to exacute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if opaged, or on an attachmen with an address.

Corporate Secretion

904-246:/918