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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P93000081470 1. Corporation Name

P & F, INC.

Principal Place of Business

Majjing Address

3164 RED BUD LANE

3164 RED BUD LANE

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90028 013 ***150.00



MARIANNA FL	32446	MARIANNA FL 32446			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					11/29/1993		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	F	Applied For
21		26			59-32163 <u>82</u>	1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	•	Additional
22		27	<u> </u>		3. Certificate of Otatos Desired	Fee F	Required
City & State	e	City & State			6. Election Campaign Financing		D May Be
23					Trust Fund Contribution	Addec	to Fees
Zip	Country	Zip	Country	r	8. This corporation owes the current year Intang		%
24	25	29 30	<u> </u>		1 discinari reporty . Livi] Yes	[XNo
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Age	<u>∌nt</u>	
DI III	LADALISA DOMNA I		81	Name			
	LABAUM, DONNA J		82	Street Ad	dress (P.O. Box Number is Not Acceptable)	_	
-	RED BUD LANE		<u> </u>	<u> </u>			
MAR	IANNA FL 32446		83				
			84	City		85 Zir	Code
					FL_ <u>`</u>		
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obligation	of Florida, Such change was auth ations of, Section 607.0505, Florida	orized by a Statutes	the corpora	rporation submits this statement for the purpose of cha ation's board of directors. I hereby accept the appointm	ient as i	registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: Re	aistered Age	nt signature regu	tired when reinstating) DATE		
12.		ND DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	FRENTON, STEVEN A		1.2 NAME				
STREET ADDRESS	3166 RED BUD LANE		1.3 STREE	T ADDRESS		•	
CITY-ST-ZIP	MARIANNA FL 32446		1.4 CITY-S				
TITLE	D	☐ DELETE	2.1 TITLE			Change	e 🗀 Addition
NAME	FRENTON, BOBBIE J		2.2 NAME				
STREET ADDRESS	3166 RED BUD LANE			T ADDRESS			
CITY-ST-ZIP	MARIANNA FL 32446		2.4 CITY-				
TILE	D	☐ DELETE	3.1 TITLE	<u>* </u>		Change	e Addition
NAME	PHILLABAUM, JERRY N		3.2 NAME				
STREET ADDRESS	3164 RED BUD LANE	;	3.3 STREE	TADDRESS	•		
CITY-ST-ZIP	MARIANNA FL 32446		3.4. CITY-5		,		
TITLE	D	☐ DELETE	4.1 TITLE	-		Change	e 🔲 Addition
NAME	PHILLABAUM, DONNA J		4. 2 NAME				
STREET ADDRESS	3164 RED BUD LANE			TADDRESS			
CITY-ST-ZIP	MARIANNA FL 32446		4.4 CITY-S	i			
TITLE		☐ DELETE	5.1 TITLE	-		Change	e 🔲 Additio
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADORESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	e Addition
NAME	}	_	6.2 NAME				
STREET ADDRESS	(6.3 STREE	T ADDRESS			
SINCE ADDRESS			64 CITY- S				

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 of instead 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 attachner by it and address, with all other like empowered.