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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000086765**1. Corporation Name

TRI-CO SPECIALTIES, INC.

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90089 006 ***150.00



Principal Place of Business Mailing Address 7403 50TH TERR E 7403 50TH TERR E BRADENTON FL 34203 BRADENTON FL 34203 US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	7	
2. Principal	Place of Business	2a. Mailing Address			12/13/1993		
The maining of					4. FEI Number Applied For	١.	
Suite, Ap	t # etc	Suite, Apt. #, etc.			65-0456952 Not Applicable	1.	
City & State		27			5. Certificate of Status Desired	;	
23		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip Count 29 30		ntry	8. This corporation owes the current year Intangible Personal Property Tax.		
	9. Name and Address of C	urrent Registered Agent			10. Name and Address of New Registered Agent	ı	
GORDON, HUGH 7403 50TH TERR E BRADENTON FL 34203				82 Street 83 City	1 Name 2 Street Address (P.O. Box Number is Not Acceptable) 3		
office or agent. I a SIGNATURE	am familiar with, and accept the o	obligations of, Section 607.0505, Flo	orida Statu E: Registered /	tes.	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	ć	
TITLE	DST	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	Š	
NAME	GORDON, HUGH		1.1 TITLE		Change Addition	-	
STREET ADDRESS			1.2 NAM	_		Š	
CITY-ST-ZIP	BRADENTON FL			EET ADDRESS	5	Ù	
TITLE	P	☐ DELETE		-ST-ZIP	+	်	
NAME	PRIDGEN, C. WAYNE	_ beech	2.1 TITL 2.2 NAM		Phange Addition	(
STREET ADDRESS				EET ADDRESS	228 304 AIR 8		
CITY-ST-ZIP	BRADENTON FL	·			1 1 1 1 1 10 -0		
TITLE		☐ DELETE	3.1 T/TL	Y-ST-ZIP	Pudyme e. Pridsen grange Addition 2328 3044 Ave E. Bradouter, LL 3-1208	21.2	
NAME		_	3.2 NAM		☐ Change ☐ Addition		
STREET ADDRESS				EET ADDRESS	,		
CITY-ST-ZIP	**			-ST-ZIP	[1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2		
TITLE		☐ DELETE	4.1 TITLI				
NAME			4. 2 NAM	I	Addition		
STREET ADDRESS				ET ADORESS ,			
CITY-ST-ZIP			4.4 CITY	ŧ			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME	•		5.2 NAMI		Change Addition		
STREET ADDRESS	4		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP	12.3		5.4 CITY-	ST-ZIP	·.		
TITLE	100 mg (100 mg)	DELETE	6.1 TITLE		Change Addition		
NAME	. 20 .	•	6.2 NAME	:			
STREET ADDRESS			6.3 STRE	ET ADORESS			
CITY-ST-ZIP	1	•	6.4 CITY-	ST-ZIP	<u> </u>		

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 exprovered 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 eddress, with all other like empowered.

SIGNATURE: