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FILED

Jan 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058001 (6)

1. Corporation Name

NORTH POLE TREES, INC.



Principal Place of Business

Mailing Address

1175 SPRING ST.
SUITE A
LARGO FL 34644

P.O. BOX 579
LARGO FL 34649-0579

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/05/1994

4. FEI Number

59-3263652

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 33774

25

29

30

9. Name and Address of Current Registered Agent

NATIONSCORP REGISTERED AGENTS, INC.
528 E. PARK AVE.
SUITE 200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

Peter Harris

82 Street Address (P.O. Box Number is Not Acceptable)

1175 Spring St.

83

84 City

Largo

FL

85 Zip Code

33774

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-19-98

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME HARRIS, PETER
STREET ADDRESS P.O. BOX 579 N/A
CITY-ST-ZIP LARGO FL 34649-0579

TITLE DV ☐ DELETE

NAME ROBERTS, MICHAEL
STREET ADDRESS 2508 FULTON ST. SW
CITY-ST-ZIP LARGO FL 34644

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President, Director, S.T. ☒ Change ☐ Addition

1.2 NAME HARRIS, PETER

1.3 STREET ADDRESS 1175 Spring St.

1.4 CITY-ST-ZIP Largo, FL 33774

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 a address.

SIGNATURE *[Signature]* President North Pole Trees Inc 1-19-98 813-595-4612

CR2E034 (10/97)