## 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 # P95000015731

1. Corporation Name

STEWARDSHIP MATERIALS, INC.

## **FILED** Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90096 040 \*\*\*150.00



Principal Place	e of Business	Mailing Address			•				
326 SOUTH DILLARD ST.		326 SOUTH DILLARD ST.							
WINTER GARDEN FL 34787		WINTER GARDEN FL 34787			DO NOTA	WRITE IN THIS S	PACE		
					<u> </u>		- AOL		ı
					3. Date Incorporated or Qual	ileo			İ
					02/24/1995 4. FEI Number	<u> </u>	T 1 4-	-lil Co-	, }
2. Principal Place of Business		2a. Mailing Address					<del></del>	plied For	,
21		26			<u>59-3297955</u>			t Applicable	ĺ
Suite, Apt. #, etc.		Suite, Apt. #, etc.	— '''		5. Certifcate of Status Desire	d 🗆	\$8.75 A		ĺ
22		27							l
City & State		City & State		6. Election Campaign Finance	ing 🗆	\$5.00	•		
23		28		Trust Fund Contribution			o.Fees	≔ಪ	
Zip Country		Zip	Zip Country		, '	nis corporation owes the current year Intangible			
24	25	29	30		Personal Property Tax.		∐ Yes	□No	
<del></del>	9. Name and Address of Curren	t Registered Agent		4 N	10. Name and Address of N	ew Registered A	gent	- ,,	
0.01	150 OALH D		*	1 Name					ĺ
GRIMES, SAUL P			82 Street Ad		ddress (P.O. Box Number is Not Acceptable)				ŀ
326 SOUTH DILLARD STREET									1
WIN	ter garden fl 34787		8	3	_				
			-	4 City	·		85 Zip (	Code	l
				City		FL	05		ł
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stat	utes, the abo	ve-named cor	poration submits this statement for	the purpose of c	hanging its	registered	
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was	authorized (	v the comorat	ion's board of directors. I hereby a	ccept the appoin	inent as re	gistered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NO	TE: Registered A	gent signature requir	ed when reinstating)	DATE			6
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AND			6/
TITLE	VP ·	☐ DELETE	1.1 TITLE	:			Change	Addition	R2E034 (11/98)
NAME	GRIMES, MELANIE		1.2 NAM	E					콩
STREET ADDRESS	308 S DILLARD ST		1.3 STRE						ᇤ
CITY-ST-ZIP	WINTER GARDEN FL 34787		1.4 CITY	-ST-ZIP	_				∫ &
TITLE	STD	☐ DELETE	2.1 TITL				☐ Change	☐ Addition	C
NAME	GRIMES, ANN M		2.2 NAM	E					
STREET ADDRESS	326 S. DILLARD ST.			ET ADDRESS					l
	WINTER GARDEN FL 34787			-ST-ZIP		•			
CITY-ST-ZIP	V	[ JELETE	3.1 TITL				Change	Addition	1
TITLE	<b>'</b>	Julie 12	3.2 NAM	1			_ , ,,	_	Į
NAME	SPEARS, RAYMOND G	₹ +				_			ĺ
STREET ADDRESS	,		ı	ET ADDRESS	•				ľ
CITY-ST-ZIP	WINTER GARDEN FL 34787	☐ DELETE		'-ST-ZIP		<del></del>	Change	[] Addition	ł
₹∏LE		☐ DELETE	4.1 TiTL	-			□ Citalige		
NAME	<b>}</b> .		4. 2 NAA	E					
STREET ADDRESS			4.3 STR	EET ADDRESS					1
CITY-ST-ZIP			4.4 CITY	-ST-ZiP					]
TITLE		☐ DELETE	5.1 TITL				☐ Change	☐ Addition	}
NAME			5.2 NAM	E					1
STREET ADDRESS	[`		5.3 STR	EET ADDRESS					1
CITY-ST-ZIP			5.4 C/TY	-ST-ZIP					
TITLE		☐ DELETE	6.1 TITU				☐ Change	Addition	]
NAME	<b>\</b>		1	_					-
19-WILL			6.2 NAW	E					
070557 +000550									
STREET ADORESS			6.3 STR	EET ADDRESS -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.