

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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90120 017 ***150.00

DOCUMENT # P95000070270

1. Corporation Name
B & S PROPERTIES, INC.

Principal Place of Business
1914 E KEYSVILLE ROAD
LITHIA FL 33547

Mailing Address
1914 E KEYSVILLE ROAD
LITHIA FL 33547



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1995

4. FEI Number
59-3334107

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ECKERFIELD, WILLIAM C SR
1914 E KEYSVILLE ROAD
LITHIA FL 33547

10. Name and Address of New Registered Agent

81 Name
William C. Eckertfield SR

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

12960 Morris Bridge Rd

83

84 City

Thonotosassa

FL

85 Zip Code

33592

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

William C Eckertfield Sr William C Eckertfield Sr 1-15-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT
NAME ECKERFIELD, WILLIAM C SR
STREET ADDRESS 1914 E KEYSVILLE RD
CITY-ST-ZIP LITHIA FL 33547

☐ DELETE

TITLE VS
NAME ECKERFIELD, SALLY
STREET ADDRESS 1914 E KEYSVILLE RD
CITY-ST-ZIP LITHIA FL 33547

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT
1.2 NAME Eckertfield, William C SR
1.3 STREET ADDRESS 12960 Morris Bridge Rd
1.4 CITY-ST-ZIP Thonotosassa FL 33592-2434

☒ Change ☐ Addition

2.1 TITLE VS
2.2 NAME Sally T Eckertfield
2.3 STREET ADDRESS 12960 Morris Bridge Rd
2.4 CITY-ST-ZIP Thonotosassa, FL 33592-2434

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

Sally T Eckertfield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/15/99 (813) 986-4157

Daytime Phone #

CR2E034 (1/98)