

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

FILED

Apr 30 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 # P96000023558 (5)

1. Corporation Name

PROPRIETARY PROPERTY TECHNOLOGIES, INC.

Principal Place of Business

% W.E.S., INC. - ENVIRONMENTAL DIV.
6389 TOWER LANE
SARASOTA FL 34240

Mailing Address

% W.E.S., INC. - ENVIRONMENTAL DIV.
6389 TOWER LANE
SARASOTA FL 34240

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1996

4. FEI Number

65-0695818

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

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

SWANGER, ROGER N
% W.E.S., INC. - ENVIRONMENTAL DIV.
6389 TOWER LANE
SARASOTA FL 34240

10. Name and Address of New Registered Agent

81

Name

Laurie DeLoach

82

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

1631 Sewel Drive

83

84

City

Sarasota

FL

85

Zip Code

34240

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

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

Laurie DeLoach
(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-98

12. OFFICERS AND DIRECTORS

TITLE President
NAME DELOACH, ANTHONY
STREET ADDRESS 6389 TOWER LANE
CITY-ST-ZIP SARASOTA FL

☐ DELETE

TITLE Vice President
NAME DELOACH, LAURIE
STREET ADDRESS 6389 TOWER LANE
CITY-ST-ZIP SARASOTA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 an address.

SIGNATURE

Laurie DeLoach

4-25-98

(941) 371-7117

CR2E034 (10/97)