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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000045384 (0)

CS & P INDUSTRIES INC.

Principal Place of Business	Mailing Address		
8547 DELAWARE DRIVE SPRING HILL FL 34607	8547 DELAWARE DRIVE SPRING HILL FL 34607		
2. Principal Place of Business	2a. Mailing Address		

**FILED** May 04 1998 8:00am Secretary of State

	MID O TIMES INTO				
Principal Plac	e of Business	Mailing Address			
8547 DELAWARE DRIVE 8547 DELAWARE DRIVE					
SPRING HILL FL \$4607 SPRING HILL FL 34607					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal P	lace of Business	2a. Mailing Address			05/29/1996 4. FEI Number Applied For
21					4. FEI Number Applied For S9-3384120 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				SR 75 Additional	
27				5. Certificate of Status Desired Fee Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be	
28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count		8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. 🛮 Yes 🔲 No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curren	Registered Agent		<del></del>	10. Name and Address of New Registered Agent
	rker, Charles L		8	1 Name	B
	17 DELAWARE DRIVE		8	2 Street	t Address (P.O. Box Number is Not Acceptable)
SPI	RING HILL FL 34607		ļ <u>.</u>		
			8	3	
			8	4 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	es, the abo	ve-named	
office or r	egistered agent, or both, in the State	of Florida. Such change was a	uthorized	by the cor	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
	in temilar with, and accept the dolliga	nons or, section 607.0505, rid	inda Siaiui	es.	
SIGNATURE	Signature, typed or printed harne of registered ager	I and title if applicable (NOTE	Registered A	gent signature	re required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	Parker, Charles L		1.2 NAM		
STREET ADDRESS	8547 DELAWARE DRIVE		1.3 STRE	E1 ADDRESS	
CITY-ST-ZIP	\$PRING HILL FL 34607		1.4 CITY	ST-ZIP	
TITLE	V	DELETE	2.1 TO LE		Change Addition
NAME	PIGNATARO, STEVEN F		2.2 NAM		
STREET ADDRESS	8547 DELAWARE DRIVE		2.3 STRE	et address	
CITY-ST-ZIP	SPRING HILL FL 34607		2. 4 CITY		
TITLE	8	DELETE	3.1 TITLE		Change Addition
NAME	PIGNATARO, DEBORAH A		32 NAMI		
STREET ADDRESS	8547 DELAWARE DRIVE		1	ET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL 34607	DELETE	3.4. CITY		
TITLE	DADVED DATOLOM A	☐ DELETE	4.1 JITLE		Change Addition
NAME	PARKER, PATRICIA A 8547 DELAWARE DRIVE		4. 2 NAM		
STREET ADDRESS	SPRING HILL FL 34607			ET ADDRESS	
CITY-ST-ZIP TITLE	OF NING FILL FL 3400/	DELETE	4.4 CITY		
NAME		[ ] OLLLIE	5.1 TITLE		Change Addition
STREET ADDRESS			5.2 NAME	T ADDRESS	
CITY-ST-ZIP					
TITLE		DELETE	5.4 CITY - 6.1 THLE	21-ZIY	☐ Change ☐ Addition
NAME		otten	62 NAME		Change C Admin
STREET ADDRESS				I ADDRESS	
CITY-ST-ZIP			6.4 CITY		
AA III	<del></del>		0.4 0111	at.til.	1

Thereby 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 suppliemental 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

4- 24-98