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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # Principal Place of Business 3410 JOHN WILSON ROAD **CANTONMENT FL 32533** 2. Principal Place of Business 5650 City & State COOK, PATRICIA

FLORIDA DEPARTMENT OF STATE

Sandra BeMortham

Secretary of State DIVISION OF CORPORATIONS

P96000048080 (1)

COOK'S GRADING & HAULING, INC.

Mailing Address

FILED Apr 10 1998 8:00am Secretary of State



(\$50)

3410 JOHN WILSON ROAD **CANTONMENT FL 32533** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1996 2a. Mailing Address 26 5650 4. FEI Number Applied For amsville Lane 59-3382964 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required State \$5.00 May Be 6. Election Campaign Financing ensaco Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible USA Personal Property Tax due June 30. X Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name AMM 3410 JOHN WILSON ROAD 82 **CANTONMENT FL 32533** 84 City 3 25 26 *Yensacola* 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Sections office or registered agent, or both agent, i am familiar with, and accompany <u>Yres iden</u> SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition ☐ Change TITLE 1.1 TITLE Douglas COOK, JOHN F 1.2 NAME 3410 JOHN WILSON ROAD STREET ADDRESS 1.3 STREET ADDRESS 32526 **CANTONMENT FL 32533** 1.4 CiTY - ST - ZIP CITY-ST-ZIP 21 THILE Change Addition TITLE COOK, PATRICIA 22 NAME NAME 3410 JOHN WILSON ROAD STREET ADDRESS 2.3 STREET ADDRESS **CANTONMENT FL 32533** surer CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST-ZIP 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.