

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90052 016 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 960000 49247 ✓

1. Corporation Name
PIG PEN LEASING CO.

554699 - 90052 - 16

Principal Place of Business Mailing Address

523 19 TH STREET
ORLANDO, FL. 32805

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 5334 CENTRAL FLORIDA PKWY	26 5334 CENTRAL FLORIDA PKWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 173	27 173
City & State	City & State
23 ORLANDO, FLORIDA	28 ORLANDO, FLORIDA
Zip Country	Zip Country
24 32821 25 USA	29 32821 30 USA

3. Date Incorporated or Qualified

JUNE 1996

4. FEI Number
59-3383306Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MARK R. BRANDT
523 19TH STREET
ORLANDO, FL. 32805

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 5334 CENTRAL FLORIDA PARKWAY #173
84 City
ORLANDO
85 FL
86 Zip Code
32821

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

MARK R. BRANDT

4/29/99

Signature of typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TREASURER ☐ DELETE	1.1 TITLE	PRESIDENT + TREASURER ☐ Change ☐ Addition
NAME	MARK R. BRANDT	1.2 NAME	MARK R. BRANDT
STREET ADDRESS	521 19 TH ST.	1.3 STREET ADDRESS	5334 CENTRAL FLORIDA PARKWAY #173
CITY-ST-ZIP	ORLANDO, FLORIDA 32821	1.4 CITY-ST-ZIP	ORLANDO, FL. 32821
TITLE	PRESIDENT ☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	RONALD P. STEWART	2.2 NAME	
STREET ADDRESS	521 19 TH ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FLORIDA	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
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, with all other like empowered.

SIGNATURE:

MARK R. BRANDT PRESIDENT + TREASURER 4/29/99