

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

FILED

Jan 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000059211 (8)**

1. Corporation Name

**HORSTING DESIGN & DRAFTING INC.**

Principal Place of Business

**1527 COUNT NICHOLAS COURT  
SARASOTA FL 34232**

Mailing Address

**1527 COUNT NICHOLAS COURT  
SARASOTA FL 34232**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 <b>2372 APPALOOSA CIRCLE</b>	26 <b>2372 APPALOOSA CIRCLE</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 <b>SARASOTA FL</b>	28 <b>SARASOTA FL</b>
Zip	Zip
24 <b>34240</b>	29 <b>34240</b>
Country	Country
25 <b>SARASOTA</b>	30 <b>SARASOTA</b>

3. Date Incorporated or Qualified

**07/15/1996**

4. FEI Number

**65-0679563**

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

9. Name and Address of Current Registered Agent

**HORSTING, BERT  
1527 COUNT NICHOLAS COURT  
SARASOTA FL 34232**

10. Name and Address of New Registered Agent

81 Name	<b>BERT HORSTING</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>2372 APPALOOSA CIRCLE</b>
83	
84 City	<b>SARASOTA</b>
85 Zip Code	<b>FL 34240</b>

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 **BERT HORSTING**

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

*Bert Horsting*  
(NOTE: Registered Agent signature required when reinstating)

**1-14-98**  
DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>P</b>
NAME	<b>BERT HORSTING</b>
STREET ADDRESS	<b>1527 COUNT NICHOLAS CT</b>
CITY-ST-ZIP	<b>SARASOTA FL</b>
TITLE	<b>VPS</b>
NAME	<b>BETTY HORSTING</b>
STREET ADDRESS	<b>1527 COUNT NICHOLAS CT</b>
CITY-ST-ZIP	<b>SARASOTA FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<b>P</b>
1.2 NAME	<b>BERT HORSTING</b>
1.3 STREET ADDRESS	<b>2372 APPALOOSA CIRCLE</b>
1.4 CITY-ST-ZIP	<b>SARASOTA, FL 34240</b>
2.1 TITLE	<b>VPS</b>
2.2 NAME	<b>NONE</b>
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
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)(f), 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:

*Bert Horsting* **BERT HORSTING** **1-14-98** **941-377-9800**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0402111

CR2E034 (10/97)