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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham 🍃

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000061047 (2)

FORD BROTHERS, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	·	I LODINDAL NO SOTIO BITCH BOTH CONTRACTOR HOLD BOTH DOLLY DOLLY AND SOTIO
2614 NE 18TH TERR 2614 NE 18TH TERR GAINESVILLE FL 32601 GAINESVILLE FL 32601				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/19/1996
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-339 1332 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State		City & State		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Ζφ	Country	This corporation owes or has paid the current year Intangible
24	[25]	29	[30]	Personal Property Tax due June 30.
	9. Name and Address of Curr	ent Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
	RD, GARY T			KOBERT E. FORD
/ 2014 NC 101F1 ICAN [82] Ştreet Ac				t Address (P.O. Box Number is Not Acceptable)
GA.	INESVILLE FL 32601		83	100 1800 SE 17 ST
			[**]	
			84 City	OCALA FL S 34471
11. Pursuant t	to the provisions of Sections 607.0 eaistered agent, or both, in the Sta	502 and 607.1508, Florida Statu ite of Florida. Such change was	tes, the above-named authorized by the co	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
• agent Lar	m familiar with, and a cept he ob	igation of, Section 607 0505, F	lorida Statutes.	a Cax Mala
SIGNATURE		6 faces	KOBER	TE. FORD 4/29/98
 	Stgnature, typed or pinled name of registered a	agent and title if applicable (NO AND DIRECTORS	1E: Registered Agent signalur	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
#2.	P	DELETE	1.1 TITLE	PRESIDENT ESECRETARY ECTION Addition
NAME	FORD, GARY T	E 0	1.2 NAME	ROBERT E. FURD TROAS PISIT
STREET ADDRESS	8103 SW 5 AVE		1.3 STREET ADDRESS	
• • •	GAINESVILLE FL 32607		I	GAINESVILLE FL 32607
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CIJY - ST - ZIP 2.1 TITLE	VICE PRES UP Change Addition
NAME	FORD, ROBERT E SR		2.2 NAME	KAY L. FORD
STREET ADDRESS	103 NW 114 WAY		2.3 STREET ADDRESS	أالمنا فالمنا فالمنا المناطقة
CITY-ST-ZIP	GAINESVILLE FL 32807		2. 4 CITY - ST - ZIP	6AINESUICE FL 32007
TITLE	VP	DELETE	3.1 TITLE	Change Addition
NAME	Ward, Kevin		3.2 NAME	
STREET ADDRESS	2614 NE 18TH TERR		3.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32801		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	
CHIT-SI-ZIF			0.4 0111-31-23	

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 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 attachment with an address.