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FILED

Feb 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000096219 (6)

1. Corporation Name

CON-SERV MANUFACTURING, INC.



Principal Place of Business

Mailing Address

ONE LAKE MORTON DRIVE  
P.O. BOX 3  
LAKELAND FL 33802-0003

ONE LAKE MORTON DRIVE  
P.O. BOX 3  
LAKELAND FL 33802-0003

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1996

2. Principal Place of Business

2a. Mailing Address

21 CON-SERV MANUFACTURING, INC.

26 605 W MANAGER ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 LAKELAND, FL

28 LAKELAND, FL

Zip

Country

Zip

Country

24 33813

25 USA

29 33813

30 USA

4. FEI Number

59-3417050

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

MILLER, MARK N  
ONE LAKE MORTON DRIVE  
LAKELAND FL 33802-0003

81 Name ROBERT W KOO

82 Street Address (P.O. Box Number is Not Acceptable)  
605 W MANAGER ROAD

83

84 City LAKELAND, FL

FL

85 Zip Code 33813

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

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

(NOTE: Registered Agent signature required when reinstating)

2/23/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME MILLER, MARK N  
STREET ADDRESS ONE LAKE MORTON DRIVE  
CITY-ST-ZIP LAKELAND FL 33802-0003

1.1 TITLE President  
1.2 NAME ROBERT W KOO  
1.3 STREET ADDRESS 605 W MANAGER ROAD  
1.4 CITY-ST-ZIP LAKELAND, FL 33813

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE VICE PRESIDENT  
2.2 NAME JAMES C KLEIN  
2.3 STREET ADDRESS 605 W MANAGER ROAD  
2.4 CITY-ST-ZIP LAKELAND, FL 33813

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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)(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.

SIGNATURE:

MARK N MILLER ROBERT W KOO

2/23/98

941 644 6925

CR2E034 (10/97)