Applied For Not Applicable

₩No

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

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

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90292 042 \*\*\*150.00

## DOCUMENT #

1. Corporation Name  LAMBRIX/BUSH WAREHOUSING,						
Principal Place of Business	Mailing Address		i inclient ten initia pitti antit antiti at			
1110 LEWIS AVE. SARASOTA FL 34237	1110 LEWIS AVE. SARASOTA FL 34237				DO NOT WRITE II	
		•			3. Date Incorporated or Qualifed 01/01/1997	
2. Principal Place of Business	2a. Mailing Address	3	_		4. FEI Number	
21	26 Suite Ant # of				65-0738296	
Suite, Apt. #, etc.	Suite, Apt. #, et	C.			5. Certificate of Status Desired	
City & State :	City & State			-	Election Campaign Financing     Trust Fund Contribution	
Zip Country 24 25	Zip	Co	untry		This corporation owes the current y     Personal Property Tax.	
9. Name and Address of Curi		[30]	$\top$		10. Name and Address of New Regis	
BUSH, DIANE R 1110 LEWIS AVE.			81 82	Name Street Add	dress (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34237			83			

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DO	NOT	WRITE	IN	THIS	SPACE
-	1101	441/11	11.4	11110	21 /105

This corporation owes the current year Intangible

Name and Address of New Registered Agent

	ETIO ATE.		1						
SARA	ASOTA FL 34237	8	3				, ,		
		. 8	4	City	······		FL	85 Zi <sub>l</sub>	Code
			┸						
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Statut agistered agent, or both, in the State of Florida. Such change was a n familiar with, and accept the obligations of, Section 607.0505, Flo	uthorized b	y th	named ne corpo	corporation submits this pration's board of director	statement for the purs. I hereby accept t	rpose of ch he appointn	anging i nent as	registered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE	· Pagistared An	ont i	n anutannia	required when reinstating)		DATE		
12.	OFFICERS AND DIRECTORS	13.	10174	agnotore t		HANGES TO OFFIC		DIREC	TORS IN 12
TITLE	DP DELETE	1.1 TITLE	-		7,00,110,101			Chang	
	Ur	1.2 NAME					, ,		
NAME	BUSH, JOHN W	1.2		ADDRESS	2030 RAI SARASOTA	cimo DE	يارو		
STREET ADDRESS	5245 WAUCHULA ROAD			DURESS	SARACATA	FI 34	240		
CITY-ST-ZIP	MYAKKA CITY FL 34251	1.4 CITY-		ZP	311.013014	1		Dhang	e Addition
TITLE	D31	2.1 TITLE					`.•		
NAME	BUSH, DIANE R	2.2 NAME			2020 RAG	eina De	ive.		
STREET ADDRESS	5245 WAUCHULA ROAD	4		ADDRESS	2030 RAG SARASOTA,	E) 2//1	11.5		
CITY-ST-ZIP	MYAKKA CITY FL 34251	2. 4 CITY	'-ST-	-ZIP	DARASOTA,	TL SYX	<u>-70</u>	700	
TITLE	DELETE	- 3.1 TITLE	•		,		L	_ Chang	e
NAME		3.2 NAME	E						
STREET ADDRESS		3.3 STRE	ΕT	ADDRESS					
CITY-ST-ZIP		3.4. CITY	-81-	-ZIP				_	
TITLE	☐ DELETE	4.1 TITLE	:				[	Chang	e Addition
NAME		4. 2 NAM	E						
STREET ADDRESS		4.3 STRE	EΤΑ	ADDRESS .					
CITY-ST-ZIP		4.4 CITY-	ST-	ZIP				_	
TITLE	☐ DELETE	5.1 TITLE	=				Į	Chang	e 🗌 Addition
NAME		5.2 NAME	Ę						
STREET ADDRESS		5.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP		5.4 CITY-	·ST-	ZIP					
TITLE	☐ DELETE	6.1 TITLE						Chang	e 🔲 Addition
NAME		6.2 NAME	E						
STREET ADDRESS		6.3 STRE	ET A	ADDRESS					
C/TY-ST-ZIP		6.4 CITY-	ST-	ZIP					
	of the fall information and the design fills and an analysis for	- 46	-4:-	n atata	d in Continu 110 07/3\/i\	Florida Statutos I fu	orthor cortife	that the	e information

Increase the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informationated 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.