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PROFIT COF:PORATION ANNUAL REPORT

1999



DOCUMENT # **P97000008480** 

LINDA'S PET SITTING COMPANY, INC.

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90068 025 \*\*\*150.00

## \* 100 H 100 K 140 H 181 H 180 K 00 K 100 K 80 K 80 K 100 K 118 K 1 10 K K

Mailing Address Principal Place of Business 13306 MARYLAND AVE 13306 MARYLAND AVE ASTATULA FL 34705 **ASTATULA FL 34705** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/23/1997 4. FEI Number Applied For 2a. Mailing Address 2. Principal Flace of Business Not Applicable 59-3424176 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired  $\Box$ Fee Required 27 22 City & State \$5.00 May Be City & Sta e 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country 8. This corporation owes the current year Intangible Zip 29 30 Personal Property Tax. 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JORDAN, EDWARD P II Street Add ess (P.O. Box Number is Not Acceptable) 82 13543 E HWY 50 **CLERMONT FL 34711** 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sec ions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 at d title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE D PECKHAM, LINDA 12 NAME NAME 1.3 STREET ADDRESS 13306 MARYLAND AVE STREET ADDRESS **ASTATULA FL 34705** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 2.1 TITLE TITLE PECKHAM, KEVIN 2.2 NAME NAME 13306 MARYLAND AVE 2.3 STREET ADDRESS STREET ADDRES ASTATULA FL 34705 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE 32 NAME NAME 33 STREET ADDRESS STREET ADDRES 34. CITY-ST-ZIP CITY-ST-ZIE ☐ Addition DELETE ☐ Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRES 4 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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** 

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICE

4.23.9

352<u>-343-2777</u>

CR2E034 (11/98)