

FILE NOW: FILING FEE AFTER MAY 1ST IS \$500.00

FILED
May 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000018140 (8)

1. Corporation Name
PNC II, INC.

Principal Place of Business
2475 MCMULLEN BOOTH ROAD
SUITE J
CLEARWATER FL 33619

Mailing Address
2475 MCMULLEN BOOTH ROAD
SUITE J
CLEARWATER FL 33619



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

g. Name and Address of Current Registered Agent

SANDERS, WALTER
13910 N. DALE MABRY HIGHWAY
SUITE ONE
TAMPA FL 33618

3. Date Incorporated or Qualified

02/24/1997

4. FEI Number

59-3429722

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agent, or both, in the State of Florida. Such change was authorized
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S

above-named corporation submits this statement for the purpose of changing its registered
agent by the corporation's board of directors. I hereby accept the appointment as registered
agent.

SIGNATURE *Walter Sanders*

Signature typed or printed name of registered agent and filed applicable

(NOTE: Registered Agent's signature required when reinstating)

WALTER SANDERS 2-26-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D NIEWIAROWSKI, CHRISTOPHER
STREET ADDRESS 2366 WETHERINGTON ROAD
CITY-ST-ZIP CLEARWATER FL 34625

TITLE ☐ DELETE
NAME D TROUTMAN, PATRICK A
STREET ADDRESS 540 CARILLON PARKWAY, APT. 1026
CITY-ST-ZIP ST. PETERSBURG FL 33716

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE ☐ Change ☐ Addition
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

Walter Sanders 4/12/98

CR2E034 (10/97)