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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

20500 (0)

DOCUMENT # P97000020592 (6)

S & S DEVELOPMENT, INC.

Principal Place of Busi	ness
4110 SOUTH FLORIDA	AVE

CICNATURE.

Mailing Address

FILED
Jun 04 1998 8:00 am
Secretary of State



4110 SOUTH FLORIDA AVE LAKELAND FL 33813 LAKELAND FL \$3613 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/25/1997 2. Principal Place of Business 2a, Mailing Address FEI Number 59-3433106 Applied For Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Žip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 30 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent 81 Name STEPHENS, DONALD K 4110 SOUTH FLORIDA AVE 62 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33813 83 84 City Zip Code 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 of registered agent and title if applicable (NOTE Registured Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE NAME STEPHENS, DONALD K 1.2 NAME **4110 SOUTH FLORIDA AVE** STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL 33813 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE SWAIN, BRIAN K NAME 2.2 NAME STREET ADDRESS 4110 SOUTH FLORIDA AVE 2.3 STREET ADDRESS LAKELAND FL 33813 CITY-ST-ZIP 2 4 CHTY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 00000025515**4** -06/08/98--01080--047 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*150.00 3.4. DITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. 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 suppliencental 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.