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**

DOCUMENT # P97000066444 (5)

DEE COMPANY OF PLANT CITY, INC.

FILED Feb 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						00110 01110 01111 018	ål bligaf bligt 40 bl	
300 W. REYNOLDS ST. 300 W. REYNOLDS ST.								
PLANT CITY	FL 33566	PLANT CITY FL 33566	PLANT CITY FL 33566			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	THIS SPACE	
						07/29/1997		
2. Principal P	2a. Mailing Address	Mailing Address			4, FEI Number		Applied For	
21		26 Post Office	Post Office Box 1118			59-3462966		Not Applicable
Sutte, Apt. #, etc.		Suite, Apt. #, etc.	٦			5. Certificate of Status Desired		75 Additional
22 City & Stat		27 City & Clata	City & State				Fe	e Required
23			7 79 4 044 777			Election Campaign Financing Trust Fund Contribution		00 May Be
Zip				Country				ded to Fees
24	25	- 	30 US		A	 This corporation owes or has paid Personal Property Tax due June 3 		Intangible
9. Name and Address of Current Registered Agent						10. Name and Address of New Regi		
VERNER, EDWARD M					Name			
	W. REYNOLDS ST.		82 Street Ad			ss (P.O. Box Number is Not Acceptable	a)	
PLANT CITY FL 33566							, 	
				83				
				84	City		era 85 2	Zip Code
44.5							FLII	·
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 as			d Agen	al signature required		DATE	
12. TITLE	D OFFICERS AI	OFFICERS AND DIRECTORS 13.		TIC	· · - 	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	
NAME	COLUMN COLLINS 44		1.1 T/ 1.2 N/				LI Chan	ige LI Addition
STREET ADDRESS	ACC III DEUISION OF				ADDRESS			Į.
CITY-ST-ZIP	SI ANT OFFI PA AREA			TY-ST	1			!
TITLE	DELETE 2.1T			£!!		☐ Chan	ige Addition	
NAME		221		ME		-		_
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TITLE	☐ DELETE 3.1		3.1 11	ΓLE			Chan	ge 🔲 Addition
NAME			3.2 NA	ME				
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STREET ADDRESS					DDRESS			
CITY-ST-ZIP			5.4 CIT					
TITLE		☐ DELETE	6.1 TIT				Chang	ge Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET A	DDRES\$			
CITY-\$T-ZIP			6.4 CIT					
14 I hereby c	artifu that the information cumplied a	with this filing dose not qualify for	the ove	mobile	on stated in Co	ction 119 07(3)(i) Florida Statutos I fur	that partitu that	the information

indicated on this annual report or supplied will also ming over not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 appear with an address.