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Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000070353 (2)

1. Corporation Name
S-N-C, INC.



Principal Place of Business

6234 FAIRWAY BAY BOULEVARD SOUTH
GULFPORT FL 33707

Mailing Address

6234 FAIRWAY BAY BOULEVARD SOUTH
GULFPORT FL 33707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1997

4. FEI Number

59-3462578

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

2. Principal Place of Business

21 5275 34th St. So.

Suite, Apt. #, etc.

22

City & State

23 St. Petersburg FL

Zip

24 33711

Country

25 USA

2a. Mailing Address

26 5275 34th St. So.

Suite, Apt. #, etc.

27

City & State

28 St. Petersburg FL

Zip

29 33711

Country

30 USA

9. Name and Address of Current Registered Agent

CAFIERO, DIANA M
6234 FAIRWAY BAY BOULEVARD SOUTH
GULFPORT FL 33707

10. Name and Address of New Registered Agent

81 Name Diana M. Cafiero
82 Street Address (P.O. Box Number is Not Acceptable)
4345 39th St. So.

83

84 City St. Petersburg FL 85 Zip Code 33711

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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CAFIERO, DIANA M
STREET ADDRESS 1125 SOUTH MAIN STREET
CITY-ST-ZIP LONGMONT CO 80501

TITLE D ☒ DELETE

NAME CAFIERO, VINCENT J
STREET ADDRESS 1125 SOUTH MAIN STREET
CITY-ST-ZIP LONGMONT CO 80501

TITLE D ☐ DELETE

NAME STEGER, JAMES A
STREET ADDRESS 6234 FAIRWAY BAY BOULEVARD SOUTH
CITY-ST-ZIP GULFPORT FL 33707

TITLE D ☐ DELETE

NAME STEGER, SUE A
STREET ADDRESS 6234 FAIRWAY BAY BOULEVARD SOUTH
CITY-ST-ZIP GULFPORT FL 33707

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 PRESIDENT ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4345 39th St. So.
1.4 CITY-ST-ZIP St. Petersburg FL 33711

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 4345 39th St. So.
2.4 CITY-ST-ZIP St. Petersburg FL 33711

3.1 TITLE V. PRESIDENT ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE SECRETARY/TREASURER ☒ 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 Diana M. Cafiero Diana M. Cafiero 11/1998 813)815-1533

CR2E034 (10/97)