

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

FILED
Jan 20 1998 8:00am
Secretary of State

DOCUMENT # P97000094587 (7)

1. Corporation Name

N-POW-HER OF SEMINOLE, INC.

Principal Place of Business

8071 BAYHAVEN DR
SEMINOLE FL 33776

Mailing Address

8071 BAYHAVEN DR
SEMINOLE FL 33776

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1997

4. FEI Number

059-3477807

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

STOUFFER, GRACE E
8071 BAYHAVEN DR
SEMINOLE FL 33776

10. Name and Address of New Registered Agent

81 Name

SUE G. TALLMADGE

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

8071 Bayhaven Drive

83

84 City

SEMINOLE

FL

85 Zip Code

33776

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

SUE G. TALLMADGE

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

1/5/98

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PRESIDENT/SECTY TREAS/DIR
SUE G. TALLMADGE
8071 BAYHAVEN DR
SEMINOLE, FL 33776

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VICE PRESIDENT/DIRECTOR
WILMER B. STOFFER
829 COUNTY HWY #1084
DE FUNIAK SPRINGS, FL 32433

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13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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:

SUE G. TALLMADGE - SUE G. TALLMADGE 1/5/98 (813) 393-1524

CR2E034 (10/97)