


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

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Secretary of State

03-06-1999 90039 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000109181					
1. Corporation Name FIRTH CLASS SERVICES, INC.					
Principal Place of Business 2407 N.W. 15TH PLACE GAINESVILLE FL 32605			Mailing Address 2407 N.W. 15TH PLACE GAINESVILLE FL 32605		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/01/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3483373	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent FIRTH, PAUL B 2407 N.W. 15TH PLACE GAINESVILLE FL 32605				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small>					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME
	P Paul B. Firth	2407 NW 15th PL	Gainesville, FL 32605		
				1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
				2.1 TITLE	2.2 NAME
	T Gaye B. Firth	2407 NW 15th PL	Gainesville, FL 32605		
				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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)