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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000007894

1. Corporation Name

PETERSON AND SONS ENTERPRISE, INC.

Principal Place of Business

3157 C.R. 774
WEBSTER FL 33597

Mailing Address

3157 C.R. 774
WEBSTER FL 33597

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/23/1998

4. FEI Number

59-3500562

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

PETERSON, JOHN O
3157 C.R. 774
WEBSTER FL 33597

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
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 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President, Inventor

☐ Change ☒ Addition

1.2 NAME

John O. Peterson

1.3 STREET ADDRESS

3157 CR 774 Webster, FL 33597

1.4 CITY-ST-ZIP

2.1 TITLE

Vice President

☐ Change ☒ Addition

2.2 NAME

Karen S. Peterson

2.3 STREET ADDRESS

3157 CR 774 Webster, FL 33597

2.4 CITY-ST-ZIP

3.1 TITLE

Executive Vice President

☐ Change ☒ Addition

3.2 NAME

John O. Peterson, Jr.

3.3 STREET ADDRESS

579 Allen Hill Rd. Brooklyn, CT 06234

3.4 CITY-ST-ZIP

4.1 TITLE

Executive Vice President

☐ Change ☒ Addition

4.2 NAME

Larry M. Peterson

4.3 STREET ADDRESS

11573rd Ave Pensacola, FL 32506

4.4 CITY-ST-ZIP

5.1 TITLE

Executive Vice President

☐ Change ☒ Addition

5.2 NAME

Mark M. Peterson

5.3 STREET ADDRESS

2524 Blue Lake Ct. Apopka, FL 32703

5.4 CITY-ST-ZIP

6.1 TITLE

Executive Vice President

☐ Change ☒ Addition

6.2 NAME

Linda K. Toporek

6.3 STREET ADDRESS

4108 Fallwood Circle Orlando, FL 32812

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, with all other like empowered.

SIGNATURE: *John O. Peterson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 02-18-99

Date

X 352-7931080

Daytime Phone #

CR2E034 (11/98)