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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
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip
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3. Date Incorporated or Qualified 01/23/1998	4. FEI Number 59-3500562	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President, Inventor <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Linda K. Toporek
6.3 STREET ADDRESS	4108 Fallwood Circle Orlando, FL
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 Peterson* **SIGNATURE OF OFFICER OR DIRECTOR** **JOHN O. PETERSON**

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: **02-18-99** Daytime Phone #: **352-7931080**

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