

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P98000023384**

1. Corporation Name

**PAUL ZANDERS LATH CO., INC.**

Principal Place of Business

**8090 ATLANTIC BOULEVARD  
APARTMENT E114  
JACKSONVILLE FL 32211**

Mailing Address

**POST OFFICE BOX 16952  
JACKSONVILLE FL 32245-6952**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.  
**2533 Waters edge dr.**

26 Suite, Apt. #, etc.  
**2533 Waters edge dr.**

23 City & State  
**Neptune beach, FL.**

28 City & State  
**Neptune beach, FL.**

24 Zip  
**32266**

29 Zip  
**32266**

9. Name and Address of Current Registered Agent

**ZANDERS, PAUL  
8090 ATLANTIC BOULEVARD  
APARTMENT E114  
JACKSONVILLE FL 32211**

3. Date Incorporated or Qualified

**04/01/1998**

4. FEI Number

**59-3498342**

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 the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name  
**ZANDERS, PAUL**

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

**2533 Waters edge dr.**

83 City  
**Neptune beach, FL.**

84 Zip  
**32266**

85 Zip Code  
**FL 32266**

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 **Paul Zanders**

**PAUL ZANDERS President**

**4/5/99**

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PVST  
ZANDERS, PAUL  
8090 ATLANTIC BOULEVARD, APT. E114  
JACKSONVILLE FL 32211**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ZANDERS, PAUL  
8090 ATLANTIC BOULEVARD, APT. E114  
JACKSONVILLE FL 32211**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[DELETE]**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[DELETE]**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[DELETE]**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**[DELETE]**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
**2533 Waters edge dr.  
Neptune beach, FL. 32266**

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
**2533 Waters edge dr.  
Neptune beach, FL. 32266**

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
**[Change] [Addition]**

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
**[Change] [Addition]**

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
**[Change] [Addition]**

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
**[Change] [Addition]**

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: **Paul Zanders**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/5/99**

Date

**1904 247-6520**

Daytime Phone #

**FILED**  
**Apr 08, 1999 8:00 am**  
**Secretary of State**

04-08-1999 90034 016 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)