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 # P98000023915

1. Corporation Name

MAINTENANCE MANAGEMENT SERVICES, INC.

MUMITIE	ANIOL MANAGEMENT OFF	, , , , , , , , , , , , , , , , , , ,							
Principal Place of Business Mailing Address									
1345 INDUSTRIAL PARK ROAD 1345 INDUSTRIAL PARK RO MULBERRY FL 33860 MULBERRY FL 33860			DAD						
						DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed 03/13/1998	<u> </u>		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		A	pplied For
26						59-350768	<u> </u>		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired		•	Additional
22		27	<u> </u>				_ _		tequired
City & State	e	City & State			6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the curr	ent year Inta		
24	25		30			Personal Property Tax.	lagistary d	Yes	□No
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New F	tegistered A	tgent	
MU	IAMADA THOMAS D		Ì	ا'°	Name	İ			
MCNAMARA, THOMAS P 2909 BAY TO BAY BLVD			ſ	82 Street Address (P.O. Box Number is Not Acce			ible)		
			-	-					
STE 309				83					
TAMPA FL 33629				84	City		r.	85 Zip	Code
	to the provisions of Sections 607.0502			Į			FL	1	istanod
office or r agent. I a	to the provisions of Sections of Cook egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a	uthonzea	ו עם	tne corporatioi	n's board of directors. I hereby accer	ot the appoin	tment as i	registered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered	Agent	t signature required		DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OF	FICERS ANI		
TITLE	D .	☐ DELETE	1.1 TH	LE				☐ Change	: Addition
NAME	SISTRUNK, THOMAS C		1.2 NA	ME		1			İ
STREET ADDRESS	1345 Industrial Park Road		1.3 ST	REET	ADORESS				ļ
CITY-ST-ZIP	MULBERRY FL 33860		1.4 CIT	Y-ŞT	r-zip		·		
TITLE	D	☐ DELETE	2.1 TIX	Œ	j	J		☐ Change	Addition
NAME	MADDY, WALTER L		2.2 NA	ME					İ
STREET ADDRESS	1345 INDUSTRIAL PARK ROAD		2.3 ST	REET	ADDRESS				
CITY-ST-ZIP	. MULBERRY FL 33860	<u> • </u>	2.4 CI	TY-S	T-ZIP .				
TITLE		☐ DELETE	3.1 111	Œ				Change	Addition
NAME			3.2 NA	ME	Ì	1			
STREET ADORESS			3.3 ST	REET	ADDRESS				Į
CITY-ST-ZIP			3.4. CI	TY-S	T-ZIP				
TITLE		☐ DELETE	4,1 TT	Œ		ſ		☐ Change	Addition
NAME			4, 2 N	ME		İ		•	Į
STREET ADDRESS	. :		4.3 ST	REET	ADDRESS				i
CITY-ST-ZIP	<u> </u>		4.4 CI	TY-S1	T-ZIP			F7 61	
TITLE	,	☐ DELETE	5.1 111				1.	Change	a ☐ Addition
NAME		•	5.2 NA						
STREET ADDRESS	1		1		TADDRESS	1			j
CITY-ST-ZIP			5.4 CF		T-ZIP		·		
TITLE		☐ DELETE	6.1 TIT			ļ		☐ Change	a ☐ Addition
NAME			6.2 NA			ł			
OTDEET ADDDESS		•	6.3 ST	REET	TADORESS	ŀ			

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, 979 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90006 030 ***150.00