

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

0421378

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**

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

**DOCUMENT # P98000030005**

 1. Corporation Name  
**RAYNOR HOLDING, INCORPORATED**

## Principal Place of Business

 9111 130TH AVE NORTH  
 LARGO FL 33773

## Mailing Address

 9111 130TH AVE NORTH  
 LARGO FL 33773

DO NOT WRITE IN THIS SPACE

## 3. Date Incorporated or Qualified

03/30/1998

## 4. FEI Number

59-3504538

## 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

## 2. Principal Place of Business

21 Suite, Apt. #, etc.

## 2a. Mailing Address

26 Suite, Apt. #, etc.

## 23 City &amp; State

## 28 City &amp; State

## 24 Zip

## 25 Country

## 29 Zip

## 30 Country

## 9. Name and Address of Current Registered Agent

 LYONS, GARY W  
 311 S MISSOURI AVE  
 CLEARWATER FL 33756

## 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 607.1506, 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

 11 TITLE ☐ DELETE

 PD  
 NAME DALLMANN, PATRICK J  
 STREET ADDRESS 9111 130TH AVE NORTH  
 CITY-ST-ZIP LARGO FL 33773

 21 TITLE ☐ DELETE

 VSTD  
 NAME HESTER, GENE A  
 STREET ADDRESS 9111 130TH AVE NORTH  
 CITY-ST-ZIP LARGO FL 33773

 31 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 41 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 51 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

 61 TITLE ☐ DELETE

 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

 11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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; 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)