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 # P98000052506

1. Corporation Name

SEMINOLE MANUFACTURING COMPANY

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90190 009 ***150.00



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Principal Place of Business Mailing Address						- 1	INI ANTE HADA ANTA A	Mila Mili IAMI	
3007 - 70TH STREET, SW 3007 - 70TH STREET, SW									
NAPLES FL 341		NAPLES FL 34105							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						06/09/1998			
Principal Place of Business 2a. Mailing Address						4. FEI Number	— ''	olied For	
21		26				× 59-3531766		Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	II	
22		City 8 Ctata						-	
City & Stat	re ·	City & State				6. Election Campaign Financing	\$5.00 M	-	
23	Country		Zip Country			Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible			
Zip	Country 25	Zip	30			Personal Property Tax.			
24			<u> </u>			10. Name and Address of New Registere			
9. Name and Address of Current Registered Agent									
SWITZER, WAYNE C				<u> </u>		(2.0.2			
3007 - 70TH STREET, SW			82	Stre	et Addre	ress (P.O. Box Number is Not Acceptable)			
l	LES FL 34105		83						
				<u> </u>					
			84	City	ŧ	F	85 Zip C	ode	
i11. 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								registered gistered	
	Signature, typed or printed name of registered age		<u> </u>	nt signal	ure required	when reinstating) DATE	AND DIRECTO	DC IN 12	
12.		ND DIRECTORS	13.		1	ADDITIONS/CHANGES TO OFFICERS	Change	Addition	
TITLE	PRESIDENT	□ pere≀e	1.1 TITLE				onlange		
NAME	1 > DAVID K. AISS		1.2 NAME					\	
STREET ADDRESS	X 2 0 0 5 10 10 10 10		1.3 STREE		ESS				
CITY-ST-ZIP			1.4 CITY-S	ST-ZIP			Change	Addition	
TITLE		☐ DETE IE	2.1 TITLE				change		
NAME	l l		2.2 NAME			-			
STREET ADDRESS			2.3 STREE		ESS	Magazi.		. [
CITY-ST-ZIP			2.4 CITY- 3.1 TITLE	SI-ZIP			Change	Addition	
TITLE	_		3.2 NAME						
NAME			3.3 STREE		Ecc				
STREET ADDRESS			3.4. CITY-		-33				
CITY-ST-ZIP			4.1 TITLE	31-ZIF			Change	Addition	
TITLE		2, 5222.12	4.2 NAME				_ •		
NAME			4.3 STREE		Eee	•			
STREET ADDRESS			4.4 CITY-S					į	
TITLE		☐ DELETE	5.1 TYTLE			· ·	Change	Addition	
J		<u> </u>	5.2 NAME				-	ĺ	
NAME CODET ADDRESS	ł		5.3 STREE		ESS		-	{	
STREET ADDRESS]		5.4 CITY-1						
CITY-ST-ZIP			6.1 TITLE				☐ Change	Addition	
		<u></u> 2	6.2 NAME				_	}	
NAME			6.3 STREE		ESS			ļ	
STREET ADDRESS	<u>'</u>		1					ſ	

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: