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 # P98000055633

1. Corporation Name

SHAMROCK INDUSTRIAL PARK INC.

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90052 050 ***150.00



| | | | • | | | _ | | | |
|--|--|---|--|--------------------|-------------------------------|--|-------------------|--------------------|------------------------|
| Principal Place of Business Mailing Address | | | | | | | | • ••• | |
| 9478 W. MARQUETTE LANE 9478 W. MARQUETTE LANE | | | | | | İ | | | |
| CRYSTAL RIVER | R FL 34428 | CRYSTAL RIVER FL 34428 | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | SPACE | | |
| | | | | | | 3. Date Incorporated or Qualifed 06/19/1998 | | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | L | App | lied For |
| 21 | | 26 | 26 | | | 59-3544056 | | Not | Applicable |
| Suite, Apt. : | #, etc. | Suite, Apt. #, etc. | - | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| City & State | | City'& State | | | | 6. Election Campaign Financing | ₹\$5 | .00° | lay Be |
| 23 | | 28 | | | | Trust Fund Contribution | Ad | ided to | Fees |
| Zip | Country | Zip | | | | 8. This corporation owes the current year Intangible | | | |
| 24 | 25 | 29 | 30 | ō | | Personal Property Tax. | Yes | <u> </u> | No |
| 9. Name and Address of Current R | | Registered Agent | gent | | | 10. Name and Address of New Registered | Agent | | |
| | . | | | 81 | Name | | | | } |
| GERRITS, EDWARD G | | | ŀ, | 82 | Street Addre | ss (P.O. Box Number is Not Acceptable) | | | |
| |) W. MARQUETTE LANE STAL RIVER FL 34428 | | 83 | | | | | | |
| 0 | | | [| _ | | | | | |
| | | | | - 1 | City | FL | . | Zip C | . |
| 11. Pursuant to | to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat | and 607.1508, Florida Statut of Florida. Such change was a ions of, Section 607.0505, Flo | es, the about the status of th | ove-l by th | named corpo ne corporation | ration submits this statement for the purpose of n's board of directors. I hereby accept the appo | changii ntment | ng its r as reg | egistered istered |
| _ | , | | | | | • | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable) | | | | | signature required | | | | |
| 12. | 0.1.00.107.00 | | 13. | | 7= | ADDITIONS/CHANGES TO OFFICERS AT | | | |
| TITLE | D | ☐ DELETE | 1.1 THL | £ | } | | Ch | ange | ☐ Addition |
| NAME | Gerrits, Edward G | | 1.2 NAME | | İ | | | | |
| STREET ADDRESS | 9478 W. MARQUETTE LANE | | 1.3 STREET ADDRESS | | ODRESS | | | | |
| CITY-ST-ZIP | CRYSTAL RIVER FL 34428 | | 1.4 CIT | Y-ST- | ZIP | | | | |
| TITLE | | ☐ DELETE | 2.1 TITE | E | | | ☐ Ch | ange | Addition |
| NAME | | | 2.2 NAA | ΜE | İ | | | | . |
| STREET ADDRESS | | 2.3 | | 2.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 2. 4 CIT | 2.4 CITY-ST-ZIP | | | | | |
| TITLE | | | | 3.1 TITLE | | | Ch | ange | ☐ Addition |
| NAME | | | 3.2 NAM | ΜĒ | | | | | 1 |
| STREET ADDRESS | • | | 3.3 STR | REETA | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CIT | Y-ST- | -ZIP | · | | _ | _ |
| TITLE | | | 4.1 TITL | 4.1 TITLE | | | Ch | ange | ☐ Addition |
| NAME | | | 4. 2 NA | ME | | | | | |
| STREET ADDRESS | | | 4,3 STF | REET A | ADDRESS | | | | } |
| CITY-ST-ZIP | | | 4.4 CIT | | | | | | |
| TITLE | | ☐ DELETE | 5.1 TITE | | | | | ange | ☐ Addition |
| NAME | | _ | 5.2 NA | | | | | | |
| STREET ADDRESS | | | 5.3 STR | REETA | ADDRESS | • | | | (|
| | | | 5.4 CIT | | | | | | J |
| CITY-ST-ZIP | | DELETE 6.1 | | | | | ☐ Ch | ange | Addition |
| TITLE | | ا عدداد | 6.2 NA | | 1 | | _ | | |
| NAME | • | | | | ADDRESS | | | | ' |
| STREET ADDRESS | | | 6.5 GT | | i | • | | | ļ |

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 an artifactorial with arreddress with all other like empowered.

SIGNATURE:

3/15/99

352-795-1906

Daytime Phone #