

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90055 039 ***150.00

DOCUMENT # P99000080520	
1. Entity Name SOUTHWEST FLORIDA THERMOPLASTIC, INC.	

Principal Place of Business 5311 40TH AVE W BRADENTON, FL 34209	Mailing Address 5311 40TH AVE W BRADENTON, FL 34209
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2. Principal Place of Business 25615 65th Ave E Suite, Apt. #, etc.	3. Mailing Address 25615 65th Ave E Suite, Apt. #, etc.
City & State Myakka City FL	City & State Myakka City FL
Zip 34251	Country USA

94043200



03282004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0948862	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MEISSNER, GREGORY C ESQ. 1111 3RD AVENUE WEST SUITE 150 BRADENTON, FL 34205	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KISSINGER, PAUL F 5311 40TH AVENUE WEST BRADENTON, FL 34209 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KISSINGER, TINA 5311 40TH AVENUE WEST BRADENTON, FL 34209 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KAMPS, DAVID A 3005 233RD STREET EAST MYAKKA CITY, FL 34251 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAMPS, JUDITH M 3005 233RD STREET EAST MYAKKA CITY, FL 34251 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kissinger, Paul F 25615 65th Ave E Myakka City FL 34251 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Kissinger, Tina 25615 65th Ave E Myakka City FL 34251 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Tina Kissinger