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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S06942

(4)

PAVELYN INDUSTRIES, INC.

## **FILED** Mar 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					-{	i B(B)) <b>B</b> (B)) Q	INDREGIEN DER	
P.O. BOX 611 FORT MYERS US	44 FL 33906-1144	P.O. BOX 61144 FORT MYERS FL 33906-1144 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
						10/15/1990		ŀ
2. Principal Place of Business 2e. Mailing Address				•		4. FEI Number		Applied For
21	26				NOT APPLICABLE		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired		5 Additional Regulred
City & State City & State						6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		d to Fees
Zip			Cou	ıntry	,	8. This corporation owes or has paid the current year Intangible		
24	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No				
		ent Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
MILLIGAN, JOHN P.					Name			
1683 NORTH FLOSSMOOR ROAD FORT MYERS FL 33919				82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
'0	ni mieno re 33318			63				
				84	City		102 7	n Codo
					· -	FL	_	p Code
11. 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								
12.	Signature, typed or priored name of registered a	ngent and little if applicable (NO ND DIRECTORS	TE Hogistered	ogA t	nt signature required		DIFFOR	
TITLE	D	DELETE 1.11		TIF	<del></del>	ADDITIONS/CHANGES TO OFFICERS AN	Change	
NAME	MILLIGAN, JOHN P.			1.2 NAME				- La radiilon
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP	PART LUIDA DI			1.4 CITY-ST-ZIP				
TITLE	D DELETE			2 1 TITLE			Change	Addition
NAME	MILLIGAN, MILDRED E.			2.2 NAME				
STREET ADDRESS	REET ADDRESS 1683 NORTH FLOSSMOOR ROAD			2.3 STREET ADDRESS				
CITY-ST-ZIP	FORT MYERS FL		2.4 C	11Y-8	iT-ZIP	111		
TITLE	DELETE			3.1 THTLE			Change	Addition
NAME			3.2 NA	-				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	T Drieve			3.4. CITY-ST-ZIP				
TITLE NAME	DELETE			4.1 TITLE			☐ Change	Addition
1			4. 2 N/					ĺ
STREET ADDRESS CITY-ST-ZIP					ADDRESS			
TITLE		DELETE	4.4 CIT 5.1 TIT		I - ZIP		Change	Addition
NAME		C Deterit	5.1 III				☐ Change	Addition
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP					- 1			
TITLE	DELETE			5.4 CITY-ST-ZIP 6.1 TITLE			Change	Addition
NAME			6.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 CIT					
	artifuthat the information aunulied	with this films does not suclify						

r nereby 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.

21/98