05-10-1999 90123 015 \*\*\*150.00

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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # \$59366

1. Corporation Name

Oringinal Place of Rusiness

SCOTT BUILT, INCORPORATED

Frincipal Flace	e or business	Mailing Address									
11927 DESOTO DR WARM MINERAL SPGS FL 34287		P.O. BOX 7976 NORTH PORT FL 34287	NORTH PORT FL 34287								
U\$		US	US				DO NOT WRITE IN THIS SPACE				
							Date Incorporated or Qual	ifed			
							<u>06/10/1991</u>				
2. Principal Pl	ace of Business	2a. Mailing Address	. Mailing Address				FEI Number			Арр	lied For
21		26	26				<b>65-</b> 0265721			Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.						\$8.7	75 A	dditional
22		27	27			5.	Certifcate of Status Desire	d 🗌	Fe	e Rec	Juired
City & State			City & State			6	Election Campaign Financ	ina	\$5	nn s	Aay Be
23		<del></del>	28			- 1	Trust Fund Contribution	"' <sup>9</sup> 🔲			Fees
Zip Country			Zip Country				This corporation owes the	current year Ir			
— ´			¬ ' — '			i i	Personal Property Tax.	content year n	26 Yes	Г	⊒No
24 25 9. Name and Address of Current						Name and Address of N	Nu Pagistared				
	9. Name and Address of Curre	ilit Registered Agent		81	Name	10.	Hame and Address of the	w registered	Agoin		
ROBERTS, BRUCE F.				٠.	Hamo						
	STATE ROAD 72		İ	82	Street Ac	Address (P.	O. Box Number is Not Acc	eptable)			
SAR	ASOTA FL 34241			83							
				84	Oit.		<del></del>	<u></u>	85	Zip C	ndo.
				64	City			FI	_  83  .	Zip Ci	uue
11 Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statutes	the at	oove	-named co	corporation	submits this statement for	the purpose of	f changin	g its r	egistered
office or re agent. I as	to the provisions of Sections 607.05 egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was aut lations of, Section 607.0505, Florid	horized Ia Statu	by tutes.	he corpora	ration's boa	ard of directors. I hereby a	ccept the appo	intment a	is reg	istered
SIGNATURE											
				gistered Agent signature require				DATE	ND DIDE	OTOF	20 10 40
12.		DELETE		13.		A	DDITIONS/CHANGES TO	OFFICERS A			Addition
TITLE	PTD	□ DELETE	1.1 TIT	LE					Cila	iige	☐ Addition
NAME	SCOTT, DAVID P.		1.2 NA	ME							
STREET ADDRESS	11927 DESOTO DR		1 3 STREET ADDRESS								
CITY-ST-ZIP	WARM MINERAL SPGS FL 34287			14 CITY-ST-ZIP							
TITLE	VD □ OELETE 2.1		2.1 TIT	2.1 TITLE					Cha	nge	Addition
NAME	SCOTT, TENA A.		2.2 NAME		ŀ		•				
STREET ADDRESS	11927 DESOTO DR			2.3 STREET ADDRESS							
	WARM MINERAL SPGS FL 34287		2. 4 CITY-ST-ZIP								
CITY-ST-ZIP	DELETE			3.1 TITLE					Cha	nae	Addition
TITLE			I.	3.2 NAME						.,90	
NAME	-										}
STREET ADDRESS			3.3 STI	REET	ADDRESS						
CITY-ST-ZIP			3.4. CI		-ZIP						
TITLE		☐ DELETE	41 TIT	Œ					Chai	nge	☐ Addition
NAME			4. 2 NA	AME.							
STREET ADDRESS			4.3 ST	REET.	ADDRESS						
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP						
TITLE		☐ DELETE	5.1 TIT						Cha	nge	Addition
NAME			5.2 NA	ME							
			5.3 STI	REET	ADDRESS						
STREET ADDRESS			5.4 CIT								
CITY-ST-ZIP		☐ DELETE	6.1 TIT		- CH.	<u>.</u>		<del></del>	[] Cha	nge	☐ Addition
TITLE		☐ DELETE								gc	
NAME			6.2 NA								
STREET ADDRESS			6.3 STI	REET	ADDRESS						

6.4 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP