

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

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

04-23-1999 90194 011 ***150.00

DOCUMENT # V25061

1. Corporation Name

SUNCOAST LIFT TRUCK SERVICE, INC.

Principal Place of Business

207 30TH AVE. W
#2 UNIT
BRADENTON FL 34205
US

Mailing Address

P.O. BOX 11467
BRADENTON FL 34282-1467
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1992

4. FEI Number

65-0316432

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

MONTGOMERY, DAVID PAUL E
2103 MANATEE AVE. W
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name V. WILLIAM KAKLIS, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

Kaklis, Reid, Venable & Witt, P.A.

83 1400 4th Avenue West

84 City Bradenton,

FL

85 Zip Code 34205

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

V. William Kaklis

April 19, 1999

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME THOMAS, FRANK H.
STREET ADDRESS 3711 23RD AVENUE WEST
CITY-ST-ZIP BRADENTON FL

TITLE D
NAME THOMAS, PATRICIA L.
STREET ADDRESS 3711 23RD AVENUE WEST
CITY-ST-ZIP BRADENTON FL

TITLE V
NAME LITEN, HARRY J.
STREET ADDRESS 614 27TH AVE. W
CITY-ST-ZIP BRADENTON FL

TITLE VP
NAME THOMAS, C W
STREET ADDRESS 3014 6TH AVE W
CITY-ST-ZIP PALMETTO FL 34221

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 7611 Desoto Memorial Hwy.
1.4 CITY-ST-ZIP BRADENTON, FL. 34209

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 7611 Desoto Memorial Hwy
2.4 CITY-ST-ZIP BRADENTON, FL. 34209

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS FRANK A. THOMAS
5.4 CITY-ST-ZIP 3711 23RD Ave West
BRADENTON, FL. 34205

6.1 TITLE
6.2 NAME
6.3 STREET 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patricia L. Thomas

4/15/99

941-761-8212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)