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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90043 045 \*\*\*150.00

1 | 1861 | \$450 | \$400 | \$100 | \$100 | \$650 | \$650 | \$100 | \$160 | \$160 | \$160 | \$160 | \$160 |

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V44901

1. Corporation Name

SIGNATURE:

FARGO HOLDING, INC.

| Principal Place                                | of Business   | Mailing /         | Address                         |                      |                                  |                            |                            |  |                          |                           |                        |
|--|---|-------------------|---------------------------------|----------------------|----------------------------------|----------------------------|----------------------------|--|--------------------------|---------------------------|------------------------|
| 80 INDUSTRIAL LOOP NORTH 80 INDUSTRIAL LOOP NO |   |                   |                                 |                      |                                  |                            |                            |  |                          |                           |                        |
| BLDG. 5<br>ORANGE PARK                         | FL 32073  |                   | BLDG. 5<br>Orange Park FL 32073 |                      |                                  |                            | DO NOT WRITE IN THIS SPACE |  |                          |                           |                        |
| OHAHOL I AH                                    |   |                   |                                 |                      | 3. Date Incorporated or Qualifed |                            |                            |  |                          |                           |                        |
|  |   |                   |                                 |                      |                                  |                            | 06/19/19                   |  |                          |                           |                        |
| 2. Principal Pl                                | ace of Business   | 2a. Maili         | 2a. Mailing Address             |                      |                                  |                            | 4. FEI Number Applied For  |  |                          |                           |                        |
| 21   |   | 26                |                                 |                      |                                  |                            | <u>59-31353</u>            | 3 <u>70.                                    </u> |                          | <del></del>               | ot Applicable          |
| Suite, Apt. a                                  | #, etc.   | <b>├</b> ─-1      | Suite, Apt. #, etc.             |                      |                                  | 5. Certifcate of           | Status Desired             |  | \$8.75 A                 | Additional  <br>equired . |                        |
| 22   | -   | 27                | <u> </u>                        |                      |                                  |                            |                            | · -  |                          | <del></del>               |                        |
| City & State                                   |   | — ´               | City & State                    |                      |                                  | <b>-</b>                   | mpaign Financing           |  | <b>\$5.00</b><br>Added t | May Be                    |                        |
| 23   |   | 28                |                                 | Cou                  | intry                            |                            | Trust Fund                 |  |                          |                           | .01 663                |
| Zip<br>─_                                      | Country   | Zip               | Ę.                              | 30                   | лы у                             |                            | Personal Pr                | ation owes the cur                               | ent year in              | Yes                       | □No                    |
| 24   | 9. Name and Address of Curre  | 29                |                                 | 30                   | 1                                |                            |                            | Address of New                                   | Registered .             |                           |                        |
|  | 9. Name and Address of Cure   | in Neglatered     | Agent                           |                      | 81 N                             | Vesue.                     | BURN & COMP                |  |                          |                           |                        |
| SMIT   | TH HULSEY & BUSEY   |                   |                                 |                      |                                  |                            |                            |  | -l-1-\                   |                           |                        |
|  |   |                   | 82 3                            |                      | ielsteroustk Dra                 | Iberus Not Accept          | able)                      |  |                          |                           |                        |
|  | ) first union national ban<br>Water St.   |                   |                                 |                      |                                  | SUITE                      | NYULE, FLA.                | 22216  |                          |                           |                        |
|  | KSONVILLE FL 32202  |                   |                                 |                      |                                  |                            | MYHAE, FLA.                | 32210  |                          | 105 7:-                   |                        |
|  |   |                   |                                 |                      | 84 (                             | City                       |                            |  | FL                       | 85   Zip                  | Code                   |
| SIGNATURE                                      | to the provisions of Sections 607.05 egistered agent, or both, in the State of familiar with, and accept the obtain   | alli              | Der                             | nnis                 | L.                               | Black                      | burn, Mana                 | ging 🚜   | 0/99<br>DATE             |                           |                        |
|  | Signature, typed or printed name of registered ag   | ND DIRECTOR       |                                 | 13.                  | ı Ağem əv                        | griature raquire           |                            | CHANGES TO OF                                    | FICERS AN                | ID DIRECTO                | ORS IN 12              |
| TITLE  | DST   | TIO DINCEOTO      | DELETE                          | 1.1 71               | TLE                              | ·                          |                            | -  | <del></del>              | ☐ Change                  | ☐ Addition             |
| NAME 1   | MURPHY, RADFORD S SR  |                   | <del></del>                     | 1.2 N                |                                  |                            |                            |  |                          |                           |                        |
| STREET ADDRESS                                 | 80 INDUSTRIAL LOOP N  |                   |                                 | 1.3 S                | TREET AD                         | DRESS I                    |                            |  |                          |                           |                        |
| ł  | ORANGE PARK FL  |                   |                                 | J                    | ITY-ST-ZI                        | J                          |                            |  |                          |                           |                        |
| CITY-ST-ZIP TITLE                              | DP DP   |                   | ☐ DELETE                        | 2.1 TI               |                                  |                            |                            | <u> </u>   |                          | ☐ Change                  | ☐ Addition             |
| NAME   | BUSH, CHRISTIAN L   |                   |                                 | 2.2 N                | AME                              | ļ                          |                            |  |                          |                           |                        |
| STREET ADDRESS                                 | 80 INDUSTRIAL LOOP N  |                   |                                 | 2.3 \$               | TREET AC                         | DORESS                     |                            |  |                          |                           |                        |
| CITY-ST-ZIP                                    | ORANGE PARK FL  |                   |                                 | 2.40                 | CITY-ST-2                        | ZIP                        |                            |  |                          |                           |                        |
| TITLE  |   |                   | DELETE                          | 3.1 TI               | ITLE                             |                            |                            |  |                          | ☐ Change                  | ☐ Addition             |
| NAME   |   |                   |                                 | 3.2 N                | AME                              | Ì                          |                            |  |                          |                           | •                      |
| STREET ADDRESS                                 |   |                   |                                 | 3.3 \$               | TREET AC                         | DORESS                     |                            |  |                          |                           |                        |
| CITY-ST-ZIP                                    |   |                   |                                 | 3.4, 0               | CITY-ST-Z                        | ZIP                        |                            |  |                          |                           |                        |
| TITLE  |   |                   | DELETE                          | 4.1 T                | ITLE                             |                            |                            |  |                          | Change                    | Addition               |
| NAME .   |   |                   |                                 | 4.21                 | NAME                             | 1                          |                            |  |                          |                           |                        |
| STREET ADDRESS                                 |   |                   |                                 | 4.3 S                | TREET AL                         | DORESS                     |                            |  |                          |                           |                        |
| CITY-ST-ZIP                                    |   |                   |                                 | _                    | ITY-ST-Z                         | IP                         |                            |  |                          | DCh                       | Addition               |
| TITLE  |   |                   | ☐ DELETÉ                        | 5.1 T                |                                  |                            | •                          | -  |                          | ☐ Change                  |                        |
| NAME   |   |                   |                                 | 5.2 N                |                                  |                            |                            |  |                          |                           |                        |
| STREET ADDRESS                                 |   |                   |                                 |                      | TREET AL                         | 1                          |                            |  |                          |                           |                        |
| CITY-ST-ZIP                                    |   |                   |                                 |                      | ITY-ST-Z                         | JP                         |                            | <u> </u>   |                          | ☐ Change                  | Addition               |
| TITLE  |   |                   | ☐ DELETE                        | 6.1 T                |                                  |                            |                            |  |                          |                           | III \(\text{Control}\) |
| NAME   |   |                   |                                 | 6.2 N                |                                  | nnpree                     |                            |  |                          |                           |                        |
| STREET ADDRESS                                 |   |                   |                                 | 1                    | TREETAL                          |                            |                            |  |                          |                           |                        |
| CITY-ST-ZIP                                    | certify that the information supplied v   | with this files d | lone not qualify for            |                      | TY-ST-Z                          |                            | Section 119 07/31/6        | Florida Statutes                                 | I further ce             | rtify that the            | information            |
| indicated                                      | certify that the information supplied to on this annual report or supplement director of the corporation or the recor Block 13 if changed, or on an attached. | al annual repo    | rt is true and accur            | rate and<br>secute t | tnat m<br>his rep                | ny signatur<br>ort as regi |                            |  |                          |                           |                        |