

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **V50572** ✓

1. Corporation Name

**DROESSLER SERVICES, INC.**

Principal Place of Business  
**7500 WAUNATTA CT.  
WINTER PARK FL 32792**

Mailing Address  
**7500 WAUNATTA CT.  
WINTER PARK FL 32792**

**FILED**  
**Jul 14, 1999 8:00 am**  
**Secretary of State**

07-14-1999 90011 001 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/13/1992**

4. FEI Number

**59-3144395**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip Country

9. Name and Address of Current Registered Agent

**DROESSLER, KATHLEEN A.  
7500 WAUNATTA CT.  
WINTER PARK FL 32792**

10. Name and Address of New Registered Agent

**81** Name

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

**83**

**84** City

**FL** **85** Zip 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**P** ☒ DELETE  
**DROESSLER, KATHLEEN**  
ADDRESS **7500 WAUNATTA COURT**  
CITY-STATE-ZIP **WINTER PARK FL**

**VPT** ☒ DELETE  
**DROESSLER, ARVEL**  
ADDRESS **7500 WAUNATTA CT.**  
CITY-STATE-ZIP **WINTER PARK FL**

**S** ☐ DELETE  
**DROESSLER, CHRISTOPHER**  
ADDRESS **7500 WAUNATTA COURT**  
CITY-STATE-ZIP **WINTER PARK FL**

☐ DELETE  
ADDRESS  
CITY-STATE-ZIP

☐ DELETE  
ADDRESS  
CITY-STATE-ZIP

☐ DELETE  
ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1** TITLE **P** ☒ Change ☐ Addition  
**1.2** NAME **Droessler, Arvel**  
**1.3** STREET ADDRESS **7500 Waunatta Court**  
**1.4** CITY-STATE-ZIP **Winter Park FL 32792**

**2.1** TITLE **VPT** ☐ Change ☒ Addition  
**2.2** NAME **Joleen Droessler**  
**2.3** STREET ADDRESS **722 E. 15th St**  
**2.4** CITY-STATE-ZIP **Orlando FL 32806**

**3.1** TITLE ☐ Change ☐ Addition  
**3.2** NAME  
**3.3** STREET ADDRESS  
**3.4** CITY-STATE-ZIP

**4.1** TITLE ☐ Change ☐ Addition  
**4.2** NAME  
**4.3** STREET ADDRESS  
**4.4** CITY-STATE-ZIP

**5.1** TITLE ☐ Change ☐ Addition  
**5.2** NAME  
**5.3** STREET ADDRESS  
**5.4** CITY-STATE-ZIP

**6.1** TITLE ☐ Change ☐ Addition  
**6.2** NAME  
**6.3** STREET ADDRESS  
**6.4** CITY-STATE-ZIP

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.

SIGNATURE:

*Kathleen A. Droessler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7-3-99 677-5612**

CR2E034 (5/99)

S88073-9001-1  
VS0572

Droessler Services Inc.  
7500 Waunatta Court  
Winter Park, FL 32792

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

This is the first annual report we have received for 1999. Yet, when we received it, the form was stamped 2<sup>nd</sup> notice. Since we didn't receive anything prior to this form, we couldn't fill it out and return it before the deadline. We feel that paying nearly a \$400.00 late fee for something that was not our fault is unjust. Therefore, please accept this check in the amount of \$150.00 for the standard renewal fee.

Thank You,



Arvel Droessler