

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **136678** (0)

1. Corporation Name
ROBBINS MANUFACTURING COMPANY



Principal Place of Business: **13001 N NEBRASKA AVE TAMPA FL 33612-4456 US**
Mailing Address: **13001 N NEBRASKA AVE TAMPA FL 33612-4456 US**

2. Principal Place of Business (21-23) and 2a. Mailing Address (26-28) fields with sub-fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: **11/18/1938**
3a. Date of Last Report: **03/02/1995**
4. FEI Number: **59-0424645**
5. Certificate of Status Desired:
6. Election Campaign Financing Trust Fund Contribution:
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **ROBBINS, CHARLES M 13001 N NEBRASKA AVE TAMPA FL 33612**
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ (DATE) _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: SD	ROBBINS, JEROME G II 3410 VIRGINIA CT. TAMPA FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	ROBBINS, R J 3011 HAWTHORNE TAMPA FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: ASAT	ROBBINS, WILLIAM L. 4107 MULLEN AVE. TAMPA FL	3.1 TITLE: ASATD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PD	HALL, LAURENCE W JR 3003 VILLA ROSA TAMPA FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: TD	ROBBINS, CHARLES M 2930 HAWTHORNE TAMPA FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE: *Charles M. Robbins* **Charles M. Robbins** 1-24-96 813-571-3030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

OFFICERS/DIRECTORS
CONT'D

D

Stein, Norm
3100 E. Fletcher Ave.
Tampa, FL 33613

D

Howze, Thomas
5414 26th Street W.
Bradenton, FL 34207

D/V

Cotanda, Dionel
3320 W. Osborne Ave.
Tampa, FL 33614