FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:52

DOCUMENT # **285196** **(2)**

1. Corporation Name
2460 CORPORATION

Principal Place of Business	Mailing Address
2460 SOUTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435	2460 SOUTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/17/1964
3a. Date of Last Report: 03/18/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-1387070 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HOWELLS, MARGARET L
2460 S. FEDERAL HWY.
APT. 15
BOYNTON BCH FL 33435

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: Margaret L. Howells (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 3/6/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD Margaret L. Howells	11 TITLE		☐ Change ☐ Addition
NAME	HOWELLS, MARGARET L.	12 NAME		
STREET ADDRESS	2460 S. FEDERAL HWY.	13 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BCH FL	14 CITY-ST-ZIP		
TITLE	TD	21 TITLE		☐ Change ☐ Addition
NAME	BAKER, FLORENCE	22 NAME		
STREET ADDRESS	2460 S. FEDERAL HWY.	23 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BCH FL	24 CITY-ST-ZIP		
TITLE	PD	31 TITLE		☐ Change ☐ Addition
NAME	ZARANSKI, HENRY P	32 NAME		
STREET ADDRESS	2460 S FEDERAL HWY	33 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BCH FL	34 CITY-ST-ZIP		
TITLE	VPD	41 TITLE	VPD	☒ Change ☐ Addition
NAME	KORNMEYER, HAROLD H	42 NAME	LOUIS IUDICA	
STREET ADDRESS	2460 S FEDERAL HWY	43 STREET ADDRESS	2460 S. FEDERAL HWY.	
CITY-ST-ZIP	BOYNTON BEACH FL	44 CITY-ST-ZIP	BOYNTON BEACH, FL.	
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	ZARANSKI, MARIE A	52 NAME		
STREET ADDRESS	2460 S. FEDERAL HWY.	53 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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 on an attachment with an address.

SIGNATURE: Henry P. Zaranski HENRY P. ZARANSKI 3-8-94 407 737-3162
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

D263488 CP