

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 323878

(9)

1. Corporation Name

ROGERS INVESTMENT CO INC



Principal Place of Business

Mailing Address

1084 FLAGLER AVENUE
P.O. BOX 492460
LEESBURG FL 34749-9460
US

1084 FLAGLER AVENUE
P.O. BOX 492460
LEESBURG FL 34749-9460
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

RICHEY, STEVEN J.
1084 FLAGLER AVENUE
LEESBURG FL 34748

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

12/07/1967

3a. Date of Last Report

01/25/1995

4. FEI Number

59-1548799

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

10. Name and Address of New Registered Agent

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 of person filing this report (Agent for the Corporation)

Signature of Registered Agent (Agent for the Corporation)

Date

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	BUTLER, PHYLLIS A.	
STREET ADDRESS	615 SINCLAIR AVE	
CITY-STATE-ZIP	TAVARES FL	
TITLE	PSD	☐ DELETE
NAME	ROGERS, RUTH G	
STREET ADDRESS	1011 S. 9TH ST.	
CITY-STATE-ZIP	LEESBURG FL	
TITLE	V	☐ DELETE
NAME	RICHEY, STEVEN J	
STREET ADDRESS	920 W MAIN ST	
CITY-STATE-ZIP	LEESBURG, FL 00000	
TITLE	D	☒ DELETE
NAME	VAUGHN, STEPHN C.	
STREET ADDRESS	2743 W. OLD US 441	
CITY-STATE-ZIP	MT. DORA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
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	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STEVEN J. RICHEY

2/5/96

904 365 2262

CR2E034 (12/95)