

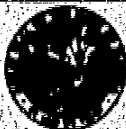
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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95 APR 18 PM 10: 07

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 361948 (3)

1. Corporation Name

E.M. ENTERPRISES MODULAR DIVISION, INC.

Principal Place of Business

**2515 EAST HANNA AVE.
TAMPA FL 33610
US**

Mailing Address

**PO BOX 8058
TAMPA FL 33674-8058
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/01/1970

3a. Date of Last Report

04/28/1994

4. FEI Number

59-1350644

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILLIAMSON, LEON A, JR
601 S FREMONT AVE
TAMPA FL 33606**

81 Name

Williamson, Jr., Leon A.

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

2515 E. Hanna Avenue

83

84 City

Tampa

FL

85 Zip Code

33610

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 fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **JURADO, JAIME**
STREET ADDRESS **601 S FREMONT**
CITY - ST - ZIP **TAMPA FL**

1.1 TITLE **D** ☒ Change ☐ Addition
1.2 NAME **Jurado, Jaime**
1.3 STREET ADDRESS **3710 Ridge Avenue**
1.4 CITY - ST - ZIP **Tampa, FL 33603**

TITLE **STD**
NAME **WALKER, FRANKLIN R.**
STREET ADDRESS **601 S FREMONT**
CITY - ST - ZIP **TAMPA FL**

2.1 TITLE **VSTD** ☒ Change ☐ Addition
2.2 NAME **Walker, Franklin R.**
2.3 STREET ADDRESS **11717 Plumosa Road**
2.4 CITY - ST - ZIP **Tampa, FL 33618**

TITLE **P**
NAME **HAMMICK, WILLIAM T.**
STREET ADDRESS **4208 U.S. HWY 301 N.**
CITY - ST - ZIP **ZEPHYRHILLS FL**

3.1 TITLE **P** ☒ Change ☐ Addition
3.2 NAME **Hamrick, William T.**
3.3 STREET ADDRESS **525 Bates Road**
3.4 CITY - ST - ZIP **Haines City, FL 33844**

TITLE **V**
NAME **WALKER, FRANKLIN R.**
STREET ADDRESS **601 S FREMONT**
CITY - ST - ZIP **TAMPA FL**

4.1 TITLE **Delete this entry** ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **AST**
NAME **CAMPISI, GRACE S.**
STREET ADDRESS **3301 CORONA AVE**
CITY - ST - ZIP **TAMPA FL**

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(b), 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 registered 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 the machines with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Franklin R. Walker, Vice President

3/30/95

(813) 238-5010

Date

Daytime Phone #