

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Matheson
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:39

DOCUMENT # 463288

(1)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RANDOLPH W. BROOKS, INC.

2951 HAVENDALE BLVD NW
WINTER HAVEN FL 33881

2951 HAVENDALE BLVD NW
WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE

2. Principal Office Location		2a. Mailed Address		3. Date of Incorporation (or Reincorporation)	3a. Date of Last Report
21. State, Apt. #, etc.		26. State, Apt. #, etc.		10/17/1974	03/11/1994
22. City & State		27. City & State		4. FEI Number	Applied For Not Applicable
23. Zip		28. Zip		59-1557639	
24. Country		29. Country		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. Does corporation have liability for intangible tax under Fla. Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROOKS, RANDOLPH W.
1603 PEARCE ROAD, NORTHWEST
WINTER HAVEN FL 33880

81. Name: Robin L. Brooks
82. Street Address (P.O. Box Number is Not Acceptable): 2951 Havendale Blvd
83. City: Winter Haven
84. State: FL
85. Zip Code: 33881

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.15(1)(b), Florida Statutes, the above named corporation certifies 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 this duty without any registered agent. I am familiar with and accept the obligations of Section 607.01(2)(b), Florida Statutes.

SIGNATURE: *Robin L. Brooks*

Print Name of Agent (Agent is required to be a resident of Florida)

11-1

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '94	
NAME	PD BROOKS, RANDOLPH W. 1603 PEARCE ROAD, N.W. WINTER HAVEN FL	NAME	Delete
NAME	D FENNELL, JUDY B. 2951 HAVENDALE BLVD. WINTER HAVEN FL	NAME	
NAME	D BROOKS, PATSY JO 2951 HAVENDAL BLVD. WINTER HAVEN FL	NAME	
NAME	D BROOKS, ROBIN L. 2951 HAVENDALE BLVD. WINTER HAVEN FL	NAME	PD Brooks, Robin L. 2951 Havendale Blvd Winter Haven, FL
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	
NAME		NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.01(2)(b) Florida Statutes. I further certify that the information contained 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 this corporation or the treasurer or transfer agent or secretary of this corporation or registered by Chapter 607, Florida Statutes, and that my signature appears in Block 12 or Block 13 of this report or on any attachment with an address.

SIGNATURE:

Judy B. Fennell

Judy B. Fennell

4-13-95

813-962-0237

OR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

Signature Required