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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 H61027 DOCUMENT #
1. Corporation Name

(9)

W. FLESCHNER, INC.

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	e of Business	Mailing Address							
4680 S US HWY 1 FT. PIERCE FL 34982		4680 S US HWY 1 FT. PIERCE FL 34982							
						3. Date Incorporated or Qualified 06/10/1985	3a. Date 03	of Last /28/19	
2. Puricipal F	face of Business	2a. Mailing Address				4. FEI Number	I	Ť	Applied For
21		26				59-2568783			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & Stat	• · · · · · · · · · · · · · · · · · · ·	City & State	·			6. Election Campaign Financing	·		•
3]		28				Trust Fund Contribution			00 May Be ed to Fees
Zip	Country	Zip	Co	ountry		8. This corporation has liability for	intanoible ta		
4	25	29	30				s No		100.00E,
. ! .	9. Name and Address of C	urrent Registered Agent		T		10. Name and Address of New I	Registered A	gent	
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FLESCH	INER, WILLIAM P., JR.				Ctenat Adde	on JP.O. Pay Number is Not Asseste	blo)		
	US HWY 1			82	OUTURE MOOR	ess (P.O. Box Number is Not Acceptal	UIÐ)		
	RCE FL 33482			83					
				84	City			85 2	ip Code
						ation submits this statement for the pu	<u>FL</u>		
THOSE AT LICE									
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certify that the information moleated on this armitial 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 33 if changing, or on an atlachment with an address. PRESIDENT William P. Fleschner, Jr. 2/29 96 (407)466-2992
NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: