

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L34985** (6)

1. Corporation Name
R. S. OLSON PROPERTY MANAGEMENT, INC.



Principal Place of Business: **1001 3RD AVENUE W. SUITE 480 C/O RICHARD S. OLSON BRADENTON FL 34205**
Mailing Address: **1001 3RD AVENUE W. SUITE 480 C/O RICHARD S. OLSON BRADENTON FL 34205**

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

3. Date Incorporated or Qualified: **12/06/1989** 3a. Date of Last Report: **05/01/1995**
4. FEI Number: **65-0161454** 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. 197.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**OLSON, RICHARD S.
1001 3RD AVENUE WEST
SUITE 480
BRADENTON FL 34205**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0002 and 607.1502, 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. Thereby, I accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0002, Florida Statutes.

SIGNATURE: _____ DATE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------|---|--|
| TITLE | PST | 1. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | OLSON, RICHARD S. | 1. NAME | |
| STREET ADDRESS | 1001 3RD AVENUE W. #480 | 1. STREET ADDRESS | |
| CITY-ST-ZIP | BRADENTON FL | 1. CITY-ST-ZIP | |
| TITLE | D | 2. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | OLSON, RICHARD S. | 2. NAME | |
| STREET ADDRESS | 1001 3RD AVENUE W. #480 | 2. STREET ADDRESS | |
| CITY-ST-ZIP | BRADENTON FL | 2. CITY-ST-ZIP | |
| TITLE | V | 3. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | DEPRENGER, VIVIAN | 3. NAME | |
| STREET ADDRESS | 2013 38TH STREET WEST | 3. STREET ADDRESS | |
| CITY-ST-ZIP | BRADENTON FL | 3. CITY-ST-ZIP | |
| TITLE | | 4. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | | 4. NAME | |
| STREET ADDRESS | | 4. STREET ADDRESS | |
| CITY-ST-ZIP | | 4. CITY-ST-ZIP | |
| TITLE | | 5. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | | 5. NAME | |
| STREET ADDRESS | | 5. STREET ADDRESS | |
| CITY-ST-ZIP | | 5. CITY-ST-ZIP | |
| TITLE | | 6. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Additor |
| NAME | | 6. NAME | |
| STREET ADDRESS | | 6. STREET ADDRESS | |
| CITY-ST-ZIP | | 6. CITY-ST-ZIP | |

14. I do hereby certify that the information supplied in this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included in 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. I am an officer or director of the corporation or the sole owner of the business and was present to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if I am not being appointed with a new address.

SIGNATURE: **Richard S. OLSON 4/15/96 941-748-8216**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRCE034 (12/95)