

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N42284**

(2)

1. Corporation Name

H.O.W., INC.



Principal Place of Business

**643 11TH AVE. EAST
BRADENTON FL 34208**

Mailing Address

**643 11TH AVE. EAST
BRADENTON FL 34208**

3. Date Incorporated or Qualified
02/28/1991

3a. Date of Last Report
01/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0258159

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRYANT, BRENDA J
643 11TH AVE. E.
BRADENTON FL 34208**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PD BRYANT, BRENDA**
STREET ADDRESS **643 11TH AVE. E.**
CITY - ST - ZIP **BRADENTON FL 34208**

TITLE ☐ DELETE
NAME **VD BRYANT, GARY SR**
STREET ADDRESS **803 24TH ST. E.**
CITY - ST - ZIP **BRADENTON FL 34208**

TITLE ☐ DELETE
NAME **SD GROSSL, NANCY**
STREET ADDRESS **1629 2ND AVE. E.**
CITY - ST - ZIP **BRADENTON FL 34208**

TITLE ☐ DELETE
NAME **T WILLIAM, JOYCE**
STREET ADDRESS **5907 LEON DR.**
CITY - ST - ZIP **PALMETTO FL 34221**

TITLE ☐ DELETE
NAME **D CRAFT, VELOXY**
STREET ADDRESS **2607 35TH AVE. W.**
CITY - ST - ZIP **BRADENTON FL 34205**

TITLE ☐ DELETE
NAME **D WESTMORELAND, JOHN**
STREET ADDRESS **1213 50TH ST. E.**
CITY - ST - ZIP **BRADENTON FL 34208**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **D**
1.3 STREET ADDRESS **Harry Robinson**
1.4 CITY - ST - ZIP **523 23rd St East Bradenton Fl 34208**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brenda Bryant
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-26-96

722-4190

CR2037 (12/95)