

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 APR -7 AM 4:57

DOCUMENT # **P93000068198 (9)**

1. Corporation Name  
**CENWEST INCORPORATED**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business: **POB-1157- LAND-O-LAKES FL 34638**  
Mailing Address: **POB-1157 LAND-O-LAKES FL 34638**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>09/24/1993</b>	3a. Date of Last Report <b>03/30/1994</b>
4. FEI Number <b>50-0210158 593274530</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>5208 US HWY #19</b> Suite, Apt. #, etc. 22	20. Mailing Address 26 <b>5208 US HWY #19</b> Suite, Apt. #, etc. 27
23 City & State <b>NEW PORT RICHEY FL</b>	28 City & State <b>NEW PORT RICHEY FL</b>
24 Zip <b>34652</b>	25 Country <b>USA</b>
29 Zip <b>34652</b>	30 Country <b>USA</b>

9. Name and Address of Current Registered Agent  
**BISHOP, JANET L  
12201 CITATION RD  
SPRING HILL FL 34610**

10. Name and Address of Now Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0509 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 607.0508, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>BISHOP, JANET L</b>
STREET ADDRESS	<b>12201 CITATION RD</b>
CITY, ST, ZIP	<b>SPRING HILL FL 34610</b>
TITLE	<b>D</b>
NAME	<b>BISHOP, EDWARD J</b>
STREET ADDRESS	<b>12201 CITATION RD</b>
CITY, ST, ZIP	<b>SPRING HILL FL 34610</b>
TITLE	<b>D</b>
NAME	<b>FRANK BISHOP</b>
STREET ADDRESS	<b>12201 CITATION RD.</b>
CITY, ST, ZIP	<b>SPRING HILL FL 34610</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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 119.07(1)(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. I am an officer or director of this 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 13 as required, or on an attachment with an address.

SIGNATURE: *Edward J. Bishop V.P.* **3-22-95**  
EDWARD J. BISHOP V.P.