

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB -8 AM 9:31

DOCUMENT # P93000082502 (4)

1. Corporation Name
ORLANDO COIN AND STAMP, INC.

Principal Place of Business Mailing Address
**3107 EDGEWATER DRIVE 3107 EDGEWATER DRIVE
ORLANDO FL 32804 ORLANDO FL 32804**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
12/02/1993 09/22/1994

2. Principal Place of Business 2a. Mailing Address
21 26

4. FEI Number Applied For
59-3212551 Not Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State City & State
23 28

6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution

Zip Country Zip Country
24 25 29 30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**BEARDSLEY, BETTY A
3107 EDGEWATER DRIVE
ORLANDO FL 32804**

10. Name and Address of New Registered Agent
**81 Name Phillip R. Finch
82 Street Address (P.O. Box Number is Not Acceptable) 201 E. Pine Street
83 Suite 1200
84 City Orlando FL 85 Zip Code 32801**

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **1/25/95**

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	BEARDSLEY, BRIAN V
STREET ADDRESS	3107 EDGEWATER DR.
CITY - ST - ZIP	ORLANDO FL 32804
TITLE	D
NAME	BEARDSLEY, BETTY A
STREET ADDRESS	3107 EDGEWATER DR.
CITY - ST - ZIP	ORLANDO FL 32804
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	D/P/S/T
3.3 STREET ADDRESS	Beardsley, Beverly
3.4 CITY - ST - ZIP	3107 Edgewater Drive Orlando, FL 32804
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 110.07(3)(a), Florida Statutes. I further certify that this 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]* **Beverly Beardsley, Beverly Beardsley, President** (407) 648-8662