FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 18 PM 5:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000094148 (1)**

1. Corporation Name

FLORIDA NOW, INC.

Principal Place of Business	Mailing Address
C/O G. D. IREDALE 4730 W IRLO BRONSON HWY KISSIMMEE FL 34746	C/O G. D. IREDALE 4730 W IRLO BRONSON HWY KISSIMMEE FL 34746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/29/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 3501 West Vine St.	26 3501 West Vine St
Suite, Apt. #, etc. 22 #104-A	Suite, Apt. #, etc. 27 #104-A
City & State 23 KISSIMMEE, FL	City & State 28 KISSIMMEE, FL
Zip / Country 24 34741 / 25 USA	Zip / Country 29 34741 / 30 USA

4. FEI Number: 59-3279031 ☐ 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

9. Name and Address of Current Registered Agent

IREDALE, G. D.
4730 W IRLO BRONSON HWY
KISSIMMEE FL 34746

10. Name and Address of New Registered Agent

81 Name: IREDALE, G. D.
82 Street Address (P.O. Box Number is Not Acceptable): 3501 West Vine Street
83: Suite # 104-A
84 City: KISSIMMEE **FL** 85 Zip Code: 34741

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when formatting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE	D	1 1 TITLE	D ☒ Change ☐ Addition
NAME	IREDALE, G. D.	1 2 NAME	IREDALE G.D.
STREET ADDRESS	4730 W IRLO BRONSON HWY	1 3 STREET ADDRESS	3501 West Vine St #104-A
CITY-ST-ZIP	KISSIMMEE FL 34746	1 4 CITY-ST-ZIP	Kissimmee, FL 34741
TITLE		2 1 TITLE	☐ Change ☐ Addition
NAME		2 2 NAME	
STREET ADDRESS		2 3 STREET ADDRESS	
CITY-ST-ZIP		2 4 CITY-ST-ZIP	
TITLE		3 1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY-ST-ZIP		3 4 CITY-ST-ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY-ST-ZIP		4 4 CITY-ST-ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY-ST-ZIP		5 4 CITY-ST-ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY-ST-ZIP		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)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or added in an attachment with an address.

SIGNATURE: [signature] 4-11-95 (407) 932-4445
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0002400 FP