

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000004649 (6)**

1. Corporation Name

OFFENHAUSER ENTERPRISES, INC.



Principal Place of Business

Mailing Address

5701 SANTA ROSA COURT
UNIT 2A
CAPE CORAL FL

5701 SANTA ROSA COURT
UNIT 2A
CAPE CORAL FL

2. Principal Place of Business

2a. Mailing Address

21 **FLAMINGO POOL SERVICE**
Suite, Apt. #, etc.

26 **12901-12 MCGREGOR BLVD**
Suite, Apt. #, etc.

3. Date Incorporated or Qualified **01/17/1995**

3a. Date of Last Report

4. FEI Number

65-0551451

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. 190.032, Florida Statutes Yes No

22 City & State

27 City & State

23 Zip

Country

28 **FT MYERS FL**

24 Zip

25 Country

29 **33919**

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OFFENHAUSER, JEFFREY T
5701 SANTA ROSA COURT
UNIT 2A
CAPE CORAL FL 33904

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 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

Jeffrey T. Offenhausen

NOTE: Registered Agent's signature required when changing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **PSTD OFFENHAUSER, JEFFREY T**
STREET ADDRESS **5701 SANTA ROSA COURT, UNIT 2A**
CITY-STATE-ZIP **CAPE CORAL FL 33904**

1.1 TITLE Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.2 NAME

TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.3 STREET ADDRESS

TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.4 CITY-STATE-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

2.1 TITLE Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

800001783538
-04/17/96--01027--007
*****200.00**

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jeffrey T. Offenhausen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-96

DATE

941-489-2729

DAYTIME PHONE #

5-11-96

CR2E034 (12/95)