

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 20 PM 3:44

DOCUMENT # J70536

(4)

1. Corporation Name

FLORIDA SOURCE, INC.

Principal Place of Business

5675 CHIPOLA CIR
448 COMMERCE WAY, S-1
ORLANDO FL 32839-2801

Mailing Address

5675 CHIPOLA CIR
448 COMMERCE WAY, S-1
ORLANDO FL 32839-2801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1987

3a. Date of Last Report

01/31/1994

4. FEI Number

59-2865268

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

2. Principal Place of Business

21 70 N. ORANGE AV.

2a. Mailing Address

26 70 N. ORANGE AV

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 ORLANDO FL 32801

City & State

28 ORLANDO FL

Zip

24 32801

Country

25 USA

Zip

29 32801

Country

30 USA

9. Name and Address of Current Registered Agent

GARDNER, JOHN I.
5675 CHIPOLA CIRCLE
ORLANDO FL 32809

10. Name and Address of New Registered Agent

81 Name

GARDNER JOHN I

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

10426 POINTVIEW CT

83

84 City

ORLANDO

FL

85 Zip Code

32836

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

GARDNER, JOHN I.

STREET ADDRESS

5675 CHIPOLA CIRCLE

CITY - ST - ZIP

ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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CITY - ST - ZIP

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CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

SAME

☒ Change ☐ Addition

1.2 NAME

SAME

1.3 STREET ADDRESS

10426 POINTVIEW CT

1.4 CITY - ST - ZIP

ORLANDO FL 32836-3739

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 deemed qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on the 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN I GARDNER

1/15/95

407-651-5556