

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 837035 (5)

1. Corporation Name

MARTIN AND MARTIN, INCORPORATED

Principal Place of Business

149 EAST QUEEN ST.
CHAMBERSBURG PA 17201

Mailing Address

149 EAST QUEEN ST.
CHAMBERSBURG PA 17201



3. Date Incorporated or Qualified

09/15/1976

3a. Date of Last Report

01/24/1995

4. FEI Number

25-1242919

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

2. Principal Place of Business

21. SUITE A
Suite, Apt. #, etc.

2a. Mailing Address

26. SUITE A
Suite, Apt. #, etc.

22. 37 S. MAIN STREET
City & State

27. 37 S. MAIN STREET
City & State

23. CHAMBERSBURG PA
Zip

28. Chambersburg PA
Zip

24. 17201
Country

25. USA

29. 17201
Country

30. USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPONDER, RAYMOND
741 CONCHSHELL MANOR
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BODNER, RICHARD M.
STREET ADDRESS 3344 CARNOOSTIE DRIVE
CITY-STATE-ZIP CHAMBERSBURG PA

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE TD
NAME SIOBERG, CHARLES M.
STREET ADDRESS 938 E. MCKINLEY ST.
CITY-STATE-ZIP CHAMBERSBURG PA

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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)(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, changed, or on an attachment with an address.

SIGNATURE:

Richard M Bodner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-96 717-264-6759
Date Daytime Phone #

CR2E034 (12/95)