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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 141260 (0)

1. Corporation Name:
LAMPKIN LABORATORIES, INC.

Principal Place of Business
715 60TH ST COURT E
P O BOX 9547
BRADENTON FL 34206-9547

Mailing Address
715 60TH ST COURT E
P O BOX 9547
BRADENTON FL 34206-9547



2. Principal Place of Business

21 Suite Apt. # etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
01/05/1942

3a. Date of Last Report
06/05/1996

4. FEI Number

59-0572810

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

SHAPOE, FRED
6501 17TH AVE W (W 318)
BRADENTON FL 34209

10. Name and Address of New Registered Agent

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 box, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ROESEL, JOHN F., JR.
STREET ADDRESS 1245 133TH ST. NE
CITY-ST-ZIP BRADENTON FL

TITLE TD
NAME BARBER, RONNIE J.
STREET ADDRESS 5705 25TH ST., W.
CITY-ST-ZIP BRADENTON FL

TITLE SD
NAME SHELTON, W. J.
STREET ADDRESS 208 30TH ST., N.W.
CITY-ST-ZIP BRADENTON FL

TITLE D
NAME PILLSBURY, ALBERT V.
STREET ADDRESS 5312 10TH AVE., DR., W.
CITY-ST-ZIP BRADENTON FL

TITLE VD
NAME SHAPOE, FRED
STREET ADDRESS 6501 17TH AVE W (W 318)
CITY-ST-ZIP BRADENTON FL

TITLE CD
NAME HINES, ANDREW H JR
STREET ADDRESS 150 SECOND AVE N 1600
CITY-ST-ZIP ST PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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 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 on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-97

741-741-350

Date

Daytime Phone #

0433802

CR2E034 (9/96)

1/23 12