

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 11 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 147534 (2)

1. Corporation Name

BUMBY & STIMPSON INC

Principal Place of Business

220 LANDSTREET ROAD
ORLANDO FL 32824

Mailing Address

220 LANDSTREET ROAD
ORLANDO FL 32824

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/21/1946

3a. Date of Last Report

05/01/1994

4. FEI Number

59-0557726

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 1031 Sunshine Lane

Suite, Apt. #, etc.

22 Suite 102

City & State

23 Altamonte Spgs, FL

Zip

24 32714

Country

25 Seminole

2a. Mailing Address

26 P O Box 916017

Suite, Apt. #, etc.

27

City & State

28 Longwood, FL

Zip

29 32791

Country

30 Seminole

9. Name and Address of Current Registered Agent

HOLLAND, FREDRIC W.
220 LANDSTREET RD
ORLANDO FL 32824

10. Name and Address of Now Registered Agent

81 Name

John F. Stimpson, Jr.

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

1031 Sunshine Lane

83

Suite 102

84 City

Altamonte Springs FL

85 Zip Code

32714

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

John F. Stimpson, Jr., President

(NOTE: Registered Agent's Signature required when resigning)

DATE

4/6/95

12. OFFICERS AND DIRECTORS

TITLE PDS
NAME STIMPSON, JOHN F. JR.
STREET ADDRESS 1709 ALVARDO CT.
CITY-ST-ZIP LONGWOOD, FLORIDA 00000

TITLE CDVT
NAME STIMPSON, JOHN F
STREET ADDRESS 353 NANHOE PLACE
CITY-ST-ZIP ORLANDO, FLORIDA 00000

TITLE V
NAME HODGES, EUGENE E.
STREET ADDRESS 4014 OLD DOMINION RD.
CITY-ST-ZIP ORLANDO FL

TITLE TSD
NAME HOLLAND, FREDRIC W.
STREET ADDRESS 8520 WILLOW WASH CT.
CITY-ST-ZIP ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE S
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE VT
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

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☐ Change ☐ Addition

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 110.07(3)(b), 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:

John F. Stimpson, Jr., President

3-22-95

407-869-6140

(Date)

(Telephone Number)