

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 # 225681 (6)

1. Corporation Name

L. C. BOGGS INDUSTRIES, INC.



Principal Place of Business

1320 STIRLING ROAD
DANIA FL 33004

Mailing Address

1320 STIRLING ROAD
DANIA FL 33004

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified
07/08/1959

3a. Date of Last Report
04/13/1995

4. FEI Number

59-0870450

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

THORNTON, LARRY W.
5453 S.W. 89TH AVE.
COOPER CITY FL 33328

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 filer of application)

(NOTE: Registered Agent signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BOGGS, ARTHUR C.
STREET ADDRESS 2311 LEE ST.
CITY-ST-ZIP HOLLYWOOD FL

☐ DELETE

TITLE VD
NAME THORNTON, LARRY W.
STREET ADDRESS 5453 S.W. 89TH AVENUE
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

TITLE TD
NAME BOGGS, LEAH PEARL
STREET ADDRESS 2311 LEE ST
CITY-ST-ZIP HOLLYWOOD FL

☐ DELETE

TITLE SD
NAME THORNTON, DEBORAH
STREET ADDRESS 5453 S.W. 89TH AVENUE
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

TITLE VD
NAME BOGGS, LESTER C.
STREET ADDRESS 512 N. LUNA COURT
CITY-ST-ZIP HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 4150 SW 75th Circle East
1.4 CITY-ST-ZIP DAVIE, FL 33314

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 2301 Lee Street
2.4 CITY-ST-ZIP Hollywood, FL 33020

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 4150 SW 75th Circle East
3.4 CITY-ST-ZIP DAVIE, FL 33314

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 2301 Lee Street
4.4 CITY-ST-ZIP Hollywood, FL 33020

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS 2311 Lee Street
5.4 CITY-ST-ZIP Hollywood, FL 33020

☒ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

(954) 922-2638

Daytime Phone #

CR2E034 (12/95)