

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **232670** (0)
1. Corporation Name
FLORIDA LEVEL & TRANSIT CO., INC.



Principal Place of Business

Mailing Address

**809 PROGRESSO DR.
805 PROGRESSO DR
FT LAUDERDALE FL 33304
US**

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FT LAUDERDALE FL 33304
US**

3. Date Incorporated or Qualified 01/28/1960	3a. Date of Last Report 01/20/1995
4. FEI Number 59-0905860	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	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MACDONALD, RICHARD J.
3020 N.E. 41ST STREET
FORT LAUDERDALE FL 33308**

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 607.0502, Florida Statutes.

SIGNATURE

Signature typed or printed for a registered agent who is not applying

Signature typed or printed for a registered agent who is not applying

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PC	☐ DELETE
NAME	MACDONALD, J RICHARD	
STREET ADDRESS	3020 NE 41 STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	TD	☒ DELETE
NAME	MACDONALD, FLORENCE M	
STREET ADDRESS	2829 NE 33 COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	SD	☐ DELETE
NAME	SZATMARY, DAVID	
STREET ADDRESS	1506 NW 109 TERRACE	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	D	☐ DELETE
NAME	FINTAK, ROBERT A.	
STREET ADDRESS	2108 N.E. 17 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	☐ DELETE
NAME	HOLT, DAVID H.	
STREET ADDRESS	390 NW 35TH LANE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	S	☐ DELETE
NAME	GROTHMANN, JOYCE C.	
STREET ADDRESS	2500 NE 22 Terrace	
CITY-ST-ZIP	Fort Lauderdale, FL 33305	

1. TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
2. TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
3. TITLE	TD ☒ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
4. TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
6. TITLE	S ☐ Change ☒ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-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 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-12-96

954-763-5300

CR2E034 (12/95)