

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 27 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 241530 (5)

1. Corporation Name
POBACO INC

Principal Place of Business
200 NORTH PHOSPHATE BLVD.
MULBERRY FL 33660

Mailing Address
200 NORTH PHOSPHATE BLVD.
MULBERRY FL 33660

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/28/1960
3a. Date of Last Report 03/08/1994

4. FEI Number 59-0948815
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 Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEYER, JAMES R.
225 S CENTRAL AVE
BARTOW FL 33830

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 registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BADCOCK, BEN M.
STREET ADDRESS 1202 KELS COURT
CITY-ST-ZIP LAKELAND FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VPD
NAME BADCOCK, HENRY C.
STREET ADDRESS 1976 VISTA VIEW
CITY-ST-ZIP LAKELAND FL

1.2 NAME ☐ Change ☐ Addition

TITLE STD
NAME BADCOCK, WOGAN S., III
STREET ADDRESS 3529 CREWS LAKE DR
CITY-ST-ZIP LAKELAND, FL 00000

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

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2.4 CITY-ST-ZIP ☐ Change ☐ Addition

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3.1 TITLE ☐ Change ☐ Addition

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4.1 TITLE ☐ Change ☐ Addition

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5.1 TITLE ☐ Change ☐ Addition

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5.3 STREET ADDRESS ☐ Change ☐ Addition

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6.1 TITLE ☐ Change ☐ Addition

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NAME
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CITY-ST-ZIP

SIGNATURE: X Ben M. Badcock, President

3/8/95 (813) 425-4921

Date Daytime (Area) #