

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 # **250873** (7)

1. Corporation Name
THE HOWARD SANDS COMPANY



Principal Place of Business 840 S LAKE OTIS DR. P. O. BOX 1520 WINTER HAVEN FL 33884 US	Mailing Address P O BOX 7261 P. O. BOX 1520 WINTER HAVEN FL 33883-7261 US
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3. Date Incorporated or Qualified 09/02/1961	3a. Date of Last Report 04/26/1995
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2. Principal Place of Business 21 185 LAKE OTIS ROAD Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 7261 Suite, Apt. #, etc.
22 City & State 23 WINTER HAVEN, FL	27 City & State 28 WINTER HAVEN, FL
24 33884 25 U.S.	29 33883-7261 30 U.S.

4. FEI Number 59-0936745	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SANDS JR, HOWARD E 840 S LAKE OTIS DR WINTER HAVEN FL 33884	10. Name and Address of New Registered Agent 81 Name HOWARD E. SANDS, JR. 82 Street Address (P.O. Box Number is Not Acceptable) 185 LAKE OTIS ROAD 83 84 City WINTER HAVEN 85 Zip Code FL 33884
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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: *Howard E. Sands, Jr.* (HOWARD E. SANDS, JR.) DATE: **4-3-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD SANDS JR., HOWARD E. 185 LAKE OTIS ROAD WINTER HAVEN FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD SANDS, MARIE H. 185 LAKE OTIS ROAD WINTER HAVEN FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V LAFFEY, JANNETTE Y. 18086 GARDENLAKE DRIVE WINTER HAVEN FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S HENRY, W.O.E. 92 LAKE WIRE DRIVE LAKELAND FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Howard E. Sands, Jr.* DATE: **4-3-96** (941) 324-4114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)