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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name 296763

(6)

FILED
Jan 25 1996 8:00 am
Secretary of State



CARDINAL INVESTMENT COMPANY

Principal Place of Business
1909 SALT MYRTLE LANE

Mailing Address

1909 SALT MYRTLE LANE ORANGE PARK FL 32073 1909 SALT MYRTLE LANE ORANGE PARK FL 32073

					L			
Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualified 09/14/1965		ate of Last Report 02/10/1995	
21 - Ennicipare					4. FEI Number		Applied For	
Suite, Apt.	# etc	Suite. Apl. #, etc.			59-6081932		Not Applicable	
22	27				5. Certificate of Status Desired		5 Additional Required	
City & Stati	te	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for	Ado	ed to Fees	
24	25	29	30	•	Florida Statutes Yes	intangible tax under: □ No	5 199,032,	
·	Name and Address of Current	Registered Agent			10. Name and Address of New I			
				81 Nan				
	PACE, GUSSIE B				eet Address (P.O. Box Number is Not Acceptable)			
	1909 SALT MYRTLE LANE				er Address (F.O. Box Multhoer is Not Acceptat	udiess (1.5. box number is not Acceptable)		
Oran	NGE PARK FL 32073			83				
				2.1	· · · · · · · · · · · · · · · · · · ·			
				84 City			ip Code	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statuti	es, the abo	ve-named	corporation submits this statement for the pu		registered offic	
familiar wi	red agent, or both, in the State of Florid; ith, and accept the obligations of, Section	 Such change was authorized Such change was authorized 	ed by the c	orporation	l corporation submits this statement for the pu n's board of directors. I hereby accept the app	ointment as registere	d agent. I am	
SIGNATURE			•					
12.	Silyr of the, typen for protect hance of registered agent a			Agent signatu	re required when reinstating)	DATE	···	
12. :	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 12	
VAME	PACE, AUGUSTA	, DELETE	1.17			☐ Change	Addition	
n-evil Sikefi address	1909 SALT MYRTLE LANE		1.2 NA	ME				
	ORANGE PARK FL		1.3 ST	REET ADDRES	is			
DNY+ST+ZIP DULF	PATD	F) bt. trc		Y-ST-ZIP				
NAME	PACE, GUSSIE	☐ DELETE	2 1 T)			☐ Change	☐ Addition	
	1909 SALT MYRTLE LANE		22 NA					
STREET ADDRESS			2351	REET ADDRES	s			
CITY - ST - ZIP LITLE	ORANGE PARK, FL 00000	ET OCCUPA		Y-ST-ZIP				
	VPD	☐ DELETE	3 1 70			☐ Change	Addition	
NAME	PACE, T.W.		3.2 NA	-				
STHEET ADDRESS	1909 SALT MYRTLE LANE		3 3. ST	REET ADORES	SS			
HTY - ST - ZIP HTLE	ORANGE PARK FL	F Dr. Fr		Y-ST-ZIP				
IAME	MIXON, B W	DELETE	4 1 111			☐ Change	☐ Addition	
			4.2 NA	ME				
STREET ADDRESS	1909 SALT MYRTLE LANE		4.3 STF	EET ADDRES	S			
CITY-ST-ZIP	ORANGE PARK FL	- Dougra		Y-ST-ZIP				
		☐ DELETE	5 1 TH			☐ Cnange	■ Addition	
vAMt			5.2 NAI	ΛE				
STEFF LADDHESS			5.3 STF	EET ADDRES:	s			
CIRY - ST - ZIP				Y - ST - ZIP				
III LE		DELETE	6 1 TiT	LE		☐ Change	☐ Addition	
NAME			62 NA	AE .	1			
STREET ADDRESS			6.3 STR	EET ADDRESS	s			
CHY-ST ZIP			6401	-ST. 7/P				

14. If 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 cath; 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 18 if the relief of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

B. W. Mixon - Treasurer

1-18-96 904-264-714~