

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 # 338353 (6)

1. Corporation Name

ROEPNACK CORPORATION



Principal Place of Business

400 E ATLANTIC BLVD
POMPANO BEACH FL 33060

Mailing Address

400 E ATLANTIC BLVD
POMPANO BEACH FL 33060

3. Date Incorporated or Qualified
12/03/1968

3a. Date of Last Report
04/14/1995

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

9. Name and Address of Current Registered Agent

ROEPNACK, ROBERT
2812 NE 22 AVE
LIGHTHOUSE POINT FL 33064

4. FEI Number
59-1229240

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

38 SW 9th TERRACE

83

84 City

BOCA RATON

FL

85 Zip Code

33486

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ROEPNACK, ROBERT A.
STREET ADDRESS 2812 N.E. 22 AVE.
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 ☐ DELETE

TITLE VTD
NAME ROEPNACK, DAVID H.
STREET ADDRESS 5960 NW 75TH WAY
CITY-ST-ZIP PARKLAND FL ☐ DELETE

TITLE S
NAME STEINMETZ, WILLIAM G.
STREET ADDRESS 270 S.E. 8TH COURT
CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ DELETE

TITLE AS
NAME FOOTE, WENDY J.
STREET ADDRESS 8037 LAKEPOINTE DR.
CITY-ST-ZIP PLANTATION FL 33322 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 38 SW 9th TERRACE
1.4 CITY-ST-ZIP BOCA RATON, FLORIDA 33486

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME ASSISTANT SECRETARY
4.3 STREET ADDRESS H. DEAN COLLINS
4.4 CITY-ST-ZIP 5177 NORTH SPRINGS WAY
CORAL SPRINGS, FLORIDA 33076

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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: ROBERT A. ROEPNACK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96 954-781-2128
Date Daytime Phone #

CR2E034 (12/95)