

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 340177 (5)

1. Corporation Name

MOORE BUSINESS SERVICE, INC.



Principal Place of Business

404 N INGRAHAM AVE
LAKELAND FL 33801

Mailing Address

404 N INGRAHAM AVE
LAKELAND FL 33801

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, 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

3. Date Incorporated or Qualified

01/15/1969

3a. Date of Last Report

04/18/1995

4. FET Number

59-1230092

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. 193.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

MOORE, S A, JR
404 N INGRAHAM AVE
LAKELAND, FL
33801

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 of Registered Agent (Print Name and Address)

Signature of President (Print Name and Address)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

11 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

D
WILSON, BICKLEY
404 N INGRAHAM AVE
LAKELAND, FL 00000

11 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

PD
MOORE, S A, JR
404 N INGRAHAM AVE
LAKELAND, FL 00000

11 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

V
GOLDEN, F.O.
404 N INGRAHAM AVE
LAKELAND, FL 00000

11 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

VST
WHITE, JACK A.
404 N. INGRAHAM AVE.
LAKELAND FL

11 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

11 TITLE

NAME

STREET ADDRESS

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13.

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ 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)(a), 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 it made under oath. That I am an officer or director of the corporation or the registered 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:

S. A. Moore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S. A. Moore, Jr., President

3-20-96

941-688-4060

CR2E034 (12/95)