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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 363510 (9)

1. Corporation Name

FLORIDA INDUSTRIES INVESTMENT CORPORATION



Principal Place of Business

Mailing Address

4802 DISTRIBUTION CT  
SUITE 7  
ORLANDO FL 32822  
US

4802 DISBRIBUTION CT  
SUITE 7  
ORLANDO FL 32822  
US

3. Date Incorporated or Qualified

04/30/1970

3a. Date of Last Report

05/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CANTY, WILLIAM A  
4802 DISTRIBUTION CT  
SUITE 7  
ORLANDO FL 32822

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 the applicable

(b)(2)(B) Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PD  
CANTY, WILLIAM A  
4802 DISTRIBUTION CT, SUITE 7  
ORLANDO FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

V  
CANTY, WILLIAM A JR  
4802 DISTRIBUTION CT., SUITE 7  
ORLANDO FL

☒ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

V  
CANTY, DANIEL A  
4802 DISTRIBUTION CT, SUITE 7  
ORLANDO FL

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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 for an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Canty

4/30/96

407-380-9070

CR2E034 (12/95)