

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **415211**

(2)

1. Corporation Name

MAGNETIX DISC CORPORATION



Principal Place of Business

**700 WEST BAY STREET
WINTER GARDEN FL 34787-2606**

Mailing Address

**700 WEST BAY STREET
WINTER GARDEN FL 34787-2606
9078 RON DEN LANE
WINDEREMERE, FL 34786**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 **9078 RON DEN LANE**

27 Suite, Apt. #, etc.

28 **WINDEREMERE, FL**

29 **34786**

30 **ORANGE**

3. Date Incorporated or Qualified

12/22/1972

3a. Date of Last Report

04/25/1995

4. FEI Number

59-2035719

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

9. Name and Address of Current Registered Agent

**LORY, JOHN
770 W. BAY STREET
WINTER GARDEN FL**

10. Name and Address of New Registered Agent

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 607.0507 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 officer, director, or registered agent required for this filing)

(Signature of Registered Agent is required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	☐ DELETE
NAME	P LORY, JOHN
STREET ADDRESS	770 W. BAY STREET
CITY-STATE-ZIP	WINTER GARDEN FL
TITLE	☐ DELETE
NAME	VST LORY, TAMERA SURBER
STREET ADDRESS	770 W. BAY STREET
CITY-STATE-ZIP	WINTER GARDENS FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 7-96

CR2E034 (12/95)