

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 # 417803

(4)

1. Corporation Name

SNOOK ENTERPRISES INC



Principal Place of Business

22307 CARSON DRIVE  
LAND O LAKES FL 34639

Mailing Address

22307 CARSON DRIVE  
LAND O LAKES FL 34639

3. Date Incorporated or Qualified  
01/31/1973

3a. Date of Last Report  
05/01/1995

4. FEI Number  
59-1439973

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 3000 Land O Lakes Blvd.

26 3000 Land O Lakes Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 Land O Lakes, FL

City & State

28 Land O Lakes, FL

24 Zip 34639

25 Country Pasco

29 Zip 34639

30 Country Pasco

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

10. Name and Address of New Registered Agent

SEBASTIAN, JUDITH  
22307 CARSON DRIVE  
LAND O LAKES FL 34639

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD  
NAME SNOOK, NORMAN  
STREET ADDRESS 2942 JABUD LANE  
CITY-ST-ZIP LAND O LAKES, FL 00000

TITLE PD  
NAME SEBASTIAN, JUDITH  
STREET ADDRESS 22307 CARSON DRIVE  
CITY-ST-ZIP LAND O LAKES, FL 00000

TITLE SD  
NAME SNOOK, JANE HILL  
STREET ADDRESS 2942 JABUD LANE  
CITY-ST-ZIP LAND O LAKES, FL 00000

TITLE TD  
NAME SEBASTIAN, TIMOTHY  
STREET ADDRESS 22307 CARSON DRIVE  
CITY-ST-ZIP LAND O LAKES FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP Zip 34639

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP Zip 34639

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP Zip 34639

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP Zip 34639

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
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:

Judith Snook Sebastian  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96

813-949-6313

Daytime Phone #

CR2E034 (12/95)