

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 459337

1. Corporation Name

Norsco Investments, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 10099 Paradise Blvd.

2a. Mailing Address

26 10099 Paradise Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Treasure Island, FL

28 Treasure Island, FL

24 33706

Country

Zip

Country

Zip

25 Pinellas

29 33706

30 Pinellas

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified 8/8/74

3a. Date of Last Report 5/1/95

4. FEI Number

59-1542799

Applied For

Not Applied For

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

SIGNATURE

*George W. Garbutt*

10. Name and Address of New Registered Agent

81 Name George W. Garbutt

82 Street Address (P.O. Box Number is Not Acceptable) 10099 Paradise Blvd.

83

84 City Treasure Island FL

85 Zip Code 33706

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, and Section 607.1508.

12. OFFICERS AND DIRECTORS

|                |                                 |
|----------------|---------------------------------|
| TITLE          | <input type="checkbox"/> DELETE |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY, ST, ZIP  |                                 |
| TITLE          | <input type="checkbox"/> DELETE |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY, ST, ZIP  |                                 |
| TITLE          | <input type="checkbox"/> DELETE |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY, ST, ZIP  |                                 |
| TITLE          | <input type="checkbox"/> DELETE |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY, ST, ZIP  |                                 |
| TITLE          | <input type="checkbox"/> DELETE |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY, ST, ZIP  |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                           |                                                                                         |
|--------------------|---------------------------|-----------------------------------------------------------------------------------------|
| 1.1 TITLE          | P                         | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME           | George W. Garbutt         |                                                                                         |
| 1.3 STREET ADDRESS | 10099 Paradise Blvd.      |                                                                                         |
| 1.4 CITY, ST, ZIP  | Treasure Island, FL 33706 |                                                                                         |
| 2.1 TITLE          | VP                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| 2.2 NAME           | Joan Garbutt              |                                                                                         |
| 2.3 STREET ADDRESS | 10099 Paradise Blvd.      |                                                                                         |
| 2.4 CITY, ST, ZIP  | Treasure Island, FL 33706 |                                                                                         |
| 3.1 TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| 3.2 NAME           |                           |                                                                                         |
| 3.3 STREET ADDRESS |                           |                                                                                         |
| 3.4 CITY, ST, ZIP  |                           |                                                                                         |
| 4.1 TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| 4.2 NAME           |                           |                                                                                         |
| 4.3 STREET ADDRESS |                           |                                                                                         |
| 4.4 CITY, ST, ZIP  |                           |                                                                                         |
| 5.1 TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| 5.2 NAME           |                           |                                                                                         |
| 5.3 STREET ADDRESS |                           |                                                                                         |
| 5.4 CITY, ST, ZIP  |                           |                                                                                         |
| 6.1 TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> 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 it were 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*George W. Garbutt*

6/3/96 -321-8000

CR2E034 (12/95)