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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

UNVAC	ge, Krim & Simons, P.	Α.						
Principa! Place	of Business	Mailing Address			- I IBBAN CIBIB BANN BONN DIAND I	ESKOL SBAL DIÐA FR	IOI UHHH OIDI	
121 N.W. 3RD ST. OCALA FL 34475 US		121 N.W. 3RD ST. OCALA FL 33475 US						
					3. Date Incorporated or Qualifie 08/30/1974		te of Last F)2/21/19	
1	ace of Business	2a. Mailing Address 26			4. FEI Number 59-1557783		⊢ 6	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution			May Be	
Z _I p	Country 25	Zip 29	Country 30	y	8. This corporation has liability for Florida Statutes			
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New		Agent	
			81	Name				
SIMONS, GARY C. 121 N.W. 3RD ST.				Street Addr	ss (P.O. Box Number is Not Acceptable)			
OCALA I	FL		83					·
			84	City		FL	85 Zi	p Code
		0502 and 607 1508. Florida Stat	utes the shove.	named corner	ration pulposito this atatament for the	compand of all		
familiar witi	h, and accept the obligations of,	Section 607.0505, Florida Statut	es.	oration s doal	ration submits this statement for the production of directors. I hereby accept the appropriate the state of t	ppointment as	anging its i	d agent. I am
familiar witi	th, and accept the obligations of the signature. Typed or printed name of registered	Section 607.0505, Florida Statut		oration s doal	d when reinstating)	ppointment as	s registered	d agent. I am
familiar witi	h, and accept the obligations of, and accept the obligations of, suggestions of the obligations of the oblig	Section 607.0505, Florida Statut	es. NOTE: Registered Age	oration s doal	rd of directors. I hereby accept the ap	DATE	s registered	d agent. I am
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