

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

FILED
Mar 12 1996 8:00 am
Secretary of State

DOCUMENT # 476818 (0)

1. Corporation Name

GLATTING JACKSON KERCHER ANGLIN LOPEZ RINEHART,
INC.

Principal Place of Business

33 E PINE STREET
ORLANDO FL 32801-2607

Mailing Address

33 E PINE STREET
ORLANDO FL 32801-2607

3. Date Incorporated or Qualified

05/27/1975

3a. Date of Last Report

04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

59-1594244

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

CROWELL, PATRICK C.
320 N. MAGNOLIA AVE.
SUITE B-9
ORLANDO FL 32801

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 607.0502 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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
KERCHER, WILLIAM C. JR.
STREET ADDRESS 247 TIMBERLAND AVENUE
CITY-STATE-ZIP LONGWOOD, FL.

TITLE ☐ DELETE

NAME VSD
ANGLIN, WILLIAM J., JR.
STREET ADDRESS 350 SENACCA TRAIL
CITY-STATE-ZIP MAITLAND FL

TITLE ☐ DELETE

NAME VTD
LOPEZ, SERGIO R.
STREET ADDRESS 629 MARINER WAY
CITY-STATE-ZIP ALTAMONTE SPRINGS, F

TITLE ☐ DELETE

NAME CD
GLATTING, JACK F.
STREET ADDRESS 105 RED BAY
CITY-STATE-ZIP LONGWOOD FL

TITLE ☐ DELETE

NAME VD
RINEHART, JOHN F.
STREET ADDRESS 17635 SEIDNER ROAD
CITY-STATE-ZIP WINTER GARDEN FL

TITLE ☐ DELETE

NAME VD
JACKSON, TIMOTHY T.
STREET ADDRESS 1397 S RIDGE LAKE CIR
CITY-STATE-ZIP LONGWOOD FL

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

8750 Pisa Drive, Apt #316
Orlando, FL 32810

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)