

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 # 521307 (9)

1. Corporation Name

DESIGNS 20, INC.



Principal Place of Business

106 E. COLLEGE AVE., STE. 640
TALLAHASSEE FL 32301

Mailing Address

106 E. COLLEGE AVE., STE. 640
TALLAHASSEE FL 32301

2. Principal Place of Business

21 P.O. Box 10208

Suite, Apt. #, etc.

22

City & State

23 TALLAHASSEE, FL

Zip

24 32302

Country

25 Leon

2a. Mailing Address

26 P.O. Box 10208

Suite, Apt. #, etc.

27

City & State

28 TALLAHASSEE, FL

Zip

29 32302

Country

30 LEON

3. Date Incorporated or Qualified

12/30/1976

3a. Date of Last Report

07/13/1995

4. FEI Number

59-1813199

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

BRETT, JUDITH E.
106 E. COLLEGE AVENUE, SUITE 640
TALLAHASSEE FL 32301

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 of the person who is the registered agent or the incorporator

Signature of the registered agent, required when registering

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
DT
BRETT, JUDITH E
332 GOVERNOR'S DRIVE P.O. Box 10208
TALLAHASSEE FL 32302

☐ DELETE

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

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS ☐ Change ☐ Addition

1.4 CITY - ST - ZIP ☐ Change ☐ Addition

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9.2 NAME ☐ Change ☐ Addition

9.3 STREET ADDRESS ☐ Change ☐ Addition

9.4 CITY - ST - ZIP ☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E034 (12/95)