

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 4:45

DOCUMENT # 526216 (7)

1. Corporation Name

UNION 700, INC.

Principal Place of Business

**700 EAST UNION STREET
JACKSONVILLE FL 32206**

Mailing Address

**700 EAST UNION STREET
JACKSONVILLE FL 32206**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/10/1977

3a. Date of Last Report

03/22/1994

4. FEI Number

59-1723874

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**GOODING, DAVID M.
225 WATER STREET, SUITE 900
JACKSONVILLE FL 32202**

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 title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	BLOUNT, W.H.	4723 EXETER LANE	JACKSONVILLE FL
STD	NICOLI, G.	3212 LAKE SHORE BLVD	JACKSONVILLE FL
VD	RHODEN, A.	4712 ORTEGA FOREST DR	JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
1.1				☐	☐
1.2				☐	☐
1.3				☐	☐
1.4				☐	☐
2.1				☐	☐
2.2				☐	☐
2.3				☐	☐
2.4				☐	☐
3.1				☐	☐
3.2				☐	☐
3.3				☐	☐
3.4				☐	☐
4.1				☐	☐
4.2				☐	☐
4.3				☐	☐
4.4				☐	☐
5.1				☐	☐
5.2				☐	☐
5.3				☐	☐
5.4				☐	☐
6.1				☐	☐
6.2				☐	☐
6.3				☐	☐
6.4				☐	☐

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 110.07(3)(b), 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 of this report, or on an attachment with an address.

SIGNATURE:

G. NICOLI, SEC/TREAS.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 29, 1995 904-353-1234
Date Registered Agent's