

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 530788 (9)

1. Corporation Name

PCR-PUERTO RICO, INCORPORATED

Principal Place of Business

AIRPORT INDUSTRIAL PARK
4404 NE 53RD RD
GAINESVILLE FL 32609
US

Mailing Address

PO BOX 1466
GAINESVILLE FL 32602
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/04/1977	3a. Date of Last Report 05/01/1994
4. FEI Number 66-0353903	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	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 replacing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	☐ Change ☐ Addition
NAME	HARRIS, D. GEORGE	1.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	1.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	☐ Change ☐ Addition
NAME	DONAHUE, RICHARD J.	2.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	2.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	☐ Change ☐ Addition
NAME	WOTIZ, ARTHUR C.	3.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	3.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	3.4 CITY - ST - ZIP	
TITLE	VP	4.1 TITLE	☐ Change ☐ Addition
NAME	LESTER, ROBERT M.	4.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	4.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	4.4 CITY - ST - ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	KILPATRICK, DONALD	5.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	5.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	5.4 CITY - ST - ZIP	
TITLE	T	6.1 TITLE	☐ Change ☐ Addition
NAME	NICK, RICHARD J.	6.2 NAME	
STREET ADDRESS	4404 NE 53RD RD	6.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	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 110.07(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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BRINGING OFFICER OR DIRECTOR

4/27/95

(904) 376-8246