

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 MAR 14 AM 7:57

DOCUMENT # 547948 (0)

1. Corporation Name

FAATZ, INC.

Principal Place of Business

2606 LAKELAND HILLS BLVD.
LAKELAND FL 33805

Mailing Address

2606 LAKELAND HILLS BLVD.
LAKELAND FL 33805

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/29/1977

3a. Date of Last Report

04/04/1994

2. Principal Place of Business

21

State, Apt. #, etc.

2a. Mailing Address

26

State, Apt. #, etc.

4. FEI Number

59-1791519

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. 109.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

WOOLEY, BRUCE
2606 LAKELAND HILLS BLVD.
LAKELAND FL

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes)

(Signature of registered agent required when registering)

(Date)

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-STATE-ZIP

P
WOOLEY, BRUCE
1256 SUMMIT CHASE
LAKELAND FL

12.5 TITLE

12.6 NAME

12.7 STREET ADDRESS

12.8 CITY-STATE-ZIP

D
DASHER, TALMADGE
6355 ROSS CREEK RD.
KATHLEEN FL

12.9 TITLE

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY-STATE-ZIP

T
DASHER, TALMADGE
6355 ROSS CREEK RD.
KATHLEEN FL

12.13 TITLE

12.14 NAME

12.15 STREET ADDRESS

12.16 CITY-STATE-ZIP

12.17 TITLE

12.18 NAME

12.19 STREET ADDRESS

12.20 CITY-STATE-ZIP

12.21 TITLE

12.22 NAME

12.23 STREET ADDRESS

12.24 CITY-STATE-ZIP

12.25 TITLE

12.26 NAME

12.27 STREET ADDRESS

12.28 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

☐ Change ☐ Addition

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

☐ Change ☐ Addition

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

☐ Change ☐ Addition

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

☐ Change ☐ Addition

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

☐ Change ☐ Addition

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), Florida Statutes. I further certify that the information included 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 13 or 13 if changed, or on an attachment with an address.

SIGNATURE:

Bruce Woolley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

Bruce Woolley, President

3-8-95

813-682-1040