

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **555928** (1)

1. Corporation Name

LYNN MACHINE SHOP, INC.



Principal Place of Business

**ROUTE 2 BOX 306
WAUCHULA FL 33873**

Mailing Address

**ROUTE 2 BOX 306
WAUCHULA FL 33873**

3. Date Incorporated or Qualified
12/22/1977

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1806791

Applied For

Not Applicable

Subs. Apt. #, etc.

Subs. Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

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

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LYNN, EDWARD HERBERT
ROUTE 2 BOX 306
WAUCHULA FL 33873**

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 person certified to receive or deliver legal notices to the state

Signature of Registered Agent (Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

☐ DELETE

NAME

LYNN, EDWARD HERBERT

STREET ADDRESS

ROUTE 2 BOX 306

CITY - ST - ZIP

WAUCHULA FL

TITLE

STD

☐ DELETE

NAME

LYNN, JOYCE F.

STREET ADDRESS

ROUTE 2 BOX 306

CITY - ST - ZIP

WAUCHULA FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE **E. H. Lynn**

President E. H. LYNN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-96

941-773-2117

Date

Daytime Phone #

CR2E034 (12/95)