

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 # 627546 (5)

1. Corporation Name

ERDMANN CO. INC.

Principal Place of Business

521 INDUSTRIAL AVE.
BOYNTON BCH. FL 33426

Mailing Address

521 INDUSTRIAL AVE.
BOYNTON BCH. FL 33426



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 1924 N.W. 8TH ST

22 City & State

27 BOCA RATON, FL.

23 Zip

28 33486

24 Country

29 Country
30 PALM BEACH

3. Date Incorporated or Qualified

06/27/1979

3a. Date of Last Report

05/01/1995

4. FEI Number

06-0814023

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

9. Name and Address of Current Registered Agent

ERDMANN, HARRIET
1924 NW 8TH ST
BOCA RATON FL 33486

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

Harriet Erdmann

HARRIET ERDMANN AGENT

2/5/96

Signature typed or printed name of registered agent and firm if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PT
ERDMANN, FRANK C JR.
4784 PALO VERDE DR.
BOYNTON BCH. FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VS
ERDMANN, ARLENE
4784 PALO VERDE DR.
BOYNTON BCH. FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
ERDMANN, HARRIET
1924 NW 8TH ST
BOCA RATON FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
ERDMANN, FRANK C
1924 NW 8TH ST
BOCA RATON FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

VS
BILACH LORRAINE
15860 FORSYTHIA CIRCLE
DELRAY BEACH, FL. 33445

☒ Change ☒ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 119.07(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:

Frank C. Erdmann

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/96 407-750-8386

Date

Daytime Phone #

CR2E034 (12/95)