

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 # 650192 (8)

1. Corporation Name

ADVANCED TECHNOLOGY & RESEARCH, INC.



Principal Place of Business

14201 MYERLAKE CIRCLE
CLEARWATER FL 34620

Mailing Address

14201 MYERLAKE CIRCLE
CLEARWATER FL 34620

3. Date Incorporated or Qualified
01/04/1980

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-1984052

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

22

27

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

City & State

City & State

23

28

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

24

Country

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HIGGINS, WILLIAM R
14201 MYERLAKE CIRCLE
CLEARWATER FL 33520

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME NYBERG, CARL ☒ DELETE
STREET ADDRESS 10355 PARADISE BLVD #714
CITY-ST-ZIP TREASURE ISLD, FL 00000

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE P
NAME HIGGINS, WILLIAM R ☐ DELETE
STREET ADDRESS 14201 MYERLAKE CIRCLE
CITY-ST-ZIP CLEARWATER FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V
NAME GRESHAM, CURTIS R. ☐ DELETE
STREET ADDRESS 14201 MYERLAKE CIRCLE
CITY-ST-ZIP CLEARWATER FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VT
NAME LEMBKE, GERALD M. ☐ DELETE
STREET ADDRESS 14201 MYERLAKE CIRCLE
CITY-ST-ZIP CLEARWATER FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME SVT LEMBKE, GERALD M.
4.3 STREET ADDRESS 14201 MYERLAKE CIRCLE
4.4 CITY-ST-ZIP CLEARWATER FL 34620

TITLE V
NAME THOMPSON, KENNETH W. ☐ DELETE
STREET ADDRESS 14201 MYERLAKE CIRCLE
CITY-ST-ZIP CLEARWATER FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V
NAME HUMPHRIES, DAVID R. ☐ DELETE
STREET ADDRESS 14201 MYERLAKE CIRCLE
CITY-ST-ZIP CLEARWATER FL 34620

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GERALD M LEMBKE
SECRETARY, VICE-PRES., TREASURER

4-25-96

(813) 539-8585

CR2E034 (12/95)