

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 # **677923** (5)
1. Corporation Name
GRENELL, INC.



Principal Place of Business
**613 EATON STREET
KEY WEST FL 33040**

Mailing Address
**613 EATON STREET
KEY WEST FL 33040**

3. Date Incorporated or Qualified
07/09/1980

3a. Date of Last Report
07/28/1995

4. FEI Number
59-2036017

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
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29 30

9. Name and Address of Current Registered Agent

**HENDRICK, JAMES T.
317 WHITEHEAD ST.
KEY WEST FL 33040**

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

Signature typed or printed name of individual agent and location applicable

Signature typed or printed name of corporate agent and location applicable

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> DELETE |
|-------|--------------------|------------------|-----------------|---------------------------------|
| PD | MAXWELL, SAMUEL J. | 613 EATON STREET | KEY WEST FL | |
| SD | TEMPLE, D.C.A. | 613 EATON STREET | KEY WEST FL | |
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| | | | | |
| | | | | |
| | | | | |
| | | | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|-------|------|----------------|-----------------|---|
| 1.1 | 1.2 | 1.3 | 1.4 | |
| 2.1 | 2.2 | 2.3 | 2.4 | |
| 3.1 | 3.2 | 3.3 | 3.4 | |
| 4.1 | 4.2 | 4.3 | 4.4 | |
| 5.1 | 5.2 | 5.3 | 5.4 | |
| 6.1 | 6.2 | 6.3 | 6.4 | |

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

SAMUEL MAXWELL

4/19/96

(305) 296 1866

CR2E034 (12/95)