

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 700109 (2)**  
1. Corporation Name  
**SELBON INC.**



Principal Place of Business Mailing Address  
**1250 S.E. 6TH AVE. DEERFIELD BEACH FL 33441**

3. Date Incorporated or Qualified **11/03/1959** 3a. Date of Last Report **03/07/1995**  
4. FEI Number **59-2197289** 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 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent  
**SABELLA, PETER A.  
1421 SE 14TH DR  
DEERFIELD BEACH 33441**

10. Name and Address of New Registered Agent  
81 Name **BURNEY, FRANK C.**  
82 Street Address (P.O. Box Number is Not Acceptable) **1632 S.E. 6 Street**  
83 **Deerfield Beach, Fl. 33441**  
84 City **FL** 85 Zip Code **33441**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Frank Burney*  
Signature typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**3/15/96**  
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD REID, JR. H V 1000 LOWRY ST PHO DELRAY BEACH FL	1.1 TITLE	PD Olsen, Milton O. 3924 N.W. 20th Ave. FT. Lauderdale, Fl.
NAME	VD OLSEN, MILTON O 3924 NW 20TH AVENUE FT LAUDERDALE FL	1.2 NAME	VD Burney, Jr. F.C. 1632 S.E. 6 Street Deerfield Bch, Fl.
STREET ADDRESS	VD BURNEY, JR. F C 1632 SE 6TH STREET DEERFIELD BEACH FL	1.3 STREET ADDRESS	VD Lentz, John W. 1600 N. Ocean Blvd 1007 Pompano Bch, Fl.
CITY-ST-ZIP	SD SCHROEDER, EARL W 6920 NW 10TH CT MARGATE FL	1.4 CITY-ST-ZIP	SD Fink, Robert S. 50 SE 12th St 135 Boca Raton, Fl.
TITLE	TD ENGLAND, JOHN O 1236 HILLSBORO MILE #308 HILLSBORO BEACH FL	4.1 TITLE	TD Reid, Jr. H.V. 1000 Lowry St. PHO Delray Beach, Fl.
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *F.C. Burney Jr.* **F.C. Burney Jr.** **3/15/96** **954-421-1966**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

CR2E037 (12/95)