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Jan 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **718000** (3)

1. Corporation Name

VOITURE 541, 40&8, INCORPORATED

Principal Place of Business

Mailing Address

C/O JACK F. HOPKINS
2120 MORNINGSIDE DRIVE
SAFETY HARBOR FL 34695

C/O JACK F. HOPKINS
2120 MORNINGSIDE DRIVE
SAFETY HARBOR FL 34695

3. Date Incorporated or Qualified

02/03/1970

4. FEI Number

23-7371660

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOPKINS, JACK F.
2120 MORNINGSIDE DRIVE
SAFETY HARBOR FL 34695

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 617.0502 and 617.1503, 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

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 SRA ☐ DELETE
NAME HOPKINS, JACK F.
STREET ADDRESS 2120 MORNINGSIDE DRIVE
CITY-ST-ZIP SAFETY HARBOR FL

TITLE TD ☐ DELETE
NAME PETTIBONE, JOHN
STREET ADDRESS 3160 CHAMBLEE LANE
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE
NAME FENSCH, WILLIAM
STREET ADDRESS 2855 SARAH DRIVE
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE
NAME HARRINGTON, DONALD SR.
STREET ADDRESS 2743 NAVAL DR.
CITY-ST-ZIP CLEARWATER FL

TITLE P ☐ DELETE
NAME JEDREY, EDWARD C.
STREET ADDRESS 13237 87TH PLACE NO.
CITY-ST-ZIP SEMINOLE FL

TITLE V ☐ DELETE
NAME MOSES, HENRY SR
STREET ADDRESS 1848 EMORY DR
CITY-ST-ZIP CLEARWATER FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

John Pettibone SIGNATURE JOHN PETTIBONE

JAN 17 1998 813-725-2121

CR2E037 (10/97)