

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **742828** (7)
1. Corporation Name
12495, INC.



Principal Place of Business: **12495 3RD STREET EAST TREASURE ISLAND FL 33706**
Mailing Address: **12495 3RD STREET EAST TREASURE ISLAND FL 33706**

3. Date Incorporated or Qualified: **05/09/1978**
3a. Date of Last Report: **03/07/1995**
4. FEI Number: **59-2242764**
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
24. Country
25. Mailing Address
26. Suite, Apt. #, etc.
27. City & State
28. Zip
29. Country
30.

9. Name and Address of Current Registered Agent
**ZACUR, RICHARD A
MENSCH, ZACUR & GRAHAM, P.A.
5200 CENTRAL AVENUE
ST PETERSBURG FL 33707**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

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: _____ DATE: _____
Signature typed or printed name of registered agent and state if applicable (NONE - Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CLARK, BRIAN	
STREET ADDRESS	12495 3RD ST E.	
CITY- ST- ZIP	TREASURE ISLAND FL 33706	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MOORE, IRMA	
STREET ADDRESS	12495 3RD ST E.	
CITY- ST- ZIP	TREASURE ISLAND FL 33706	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BERGER, ANTON S	
STREET ADDRESS	12495 3RD ST E.	
CITY- ST- ZIP	TREASURE ISLAND FL 33706	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HARTWIG, ANN	
STREET ADDRESS	12495 3RD ST., E	
CITY- ST- ZIP	TREASURE ISLAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY- ST- ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Monica M. Muller
33 STREET ADDRESS	12495 3rd St. E.
34 CITY- ST- ZIP	Treasure Island, FL 33706
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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: _____ **1-30-96** **813-398-9315**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/96)