

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 # 841924

(4)

1. Corporation Name

MOBILE PEN COMPANY, INC.

Principal Place of Business

2575 SCHILLINGER ROAD
SEMMES AL 36575

Mailing Address

2575 SCHILLINGER ROAD
SEMMES AL 36575



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

Zip

Country

30

9. Name and Address of Current Registered Agent

ZIEMAN, STEPHEN
13 CENTER ROAD
GULF BREEZE, FL 32561

3. Date Incorporated or Qualified

11/30/1978

3a. Date of Last Report

12/29/1995

4. FEI Number

63-0751670

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

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 registered agent and that of applicant

(Typed) Registered Agent's signature required when not stated

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SUMMERSELL, FRANK H., JR.
STREET ADDRESS 633 TUDOR LANE WEST
CITY-ST-ZIP MOBILE AL 33608 ☐ DELETE

TITLE STD
NAME GROVENSTEIN, GERALD D.
STREET ADDRESS 4045 MARCHFIELD DRIVE SOUTH
CITY-ST-ZIP MOBILE AL 36603 ☒ DELETE

TITLE D
NAME SUMMERSELL, ANN M.
STREET ADDRESS 633 TUDOR LANE WEST
CITY-ST-ZIP MOBILE AL 33608 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

VP ☐ Change ☒ Addition
Francis H. Summersell, III
7 Dogwood Lane
Mobile, AL 36608

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

VP ☐ Change ☒ Addition
James Bradford Summersell
321 Border Dr., West
Mobile, AL 36608

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

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

F. H. Summersell, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-96

800/468-1588

DS-

Daytime Phone

CR2E034 (12/95)