

FILE NOW: FILING FEE AFTER MAY 1 IS \$200.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F34843**

(5)

1. Corporation Name

COLEMAN ENTERPRISES, INC.

FILED
Apr 01 1996 8:00 am
Secretary of State



Principal Place of Business

**% ROBERT C COLEMAN
1000 SPENCER AVENUE
CLEARWATER FL 34616**

Mailing Address

**% ROBERT C COLEMAN
1000 SPENCER AVENUE
CLEARWATER FL 34616**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, 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

**COLEMAN, ROBERT C.
1000 SPENCER AVENUE
CLEARWATER FL 33516**

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 607.1503, 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
STD	COLEMAN, JEWELL R.	1000 SPENCER AVENUE	CLEARWATER, FL 00000	☐
PD	COLEMAN, ROBERT C.	1000 SPENCER AVENUE	CLEARWATER, FL 00000	☐
				☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	5. DELETE	6. CHANGE	7. ADDITION
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
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				☐	☐	☐
				☐	☐	☐

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption state in Section 119.02(3)(k), Florida Statutes. I further certify that the information indicated on this and the 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 registered agent or authorized person to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert C. Coleman
Robert C. Coleman

3/27/96 413-447-2603

CR2E034 (12/95)