

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 # F40237

(2)

1. Corporation Name

R. ZORC & SONS BUILDERS, INC.

Principal Place of Business

2730 FLIGHT SAFETY DRIVE
STE 100
VERO BEACH FL 32960

Mailing Address

P.O. BOX 2913
VERO BEACH FL 32961



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

BLOCK, SAMUEL A., P.A.
2127 10TH AVE.
VERO BEACH FL 32960

3. Date Incorporated or Qualified

06/10/1981

3a. Date of Last Report

03/16/1995

4. FEI Number

59-2115023

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 of Registered Agent (must be signed by a person who is at least 18 years old)

Signature of Registered Agent (must be signed by a person who is at least 18 years old)

DATE

OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ DELETE	☐ Change ☐ Addition
1. NAME: ZORC, RICHARD J	1.1 TITLE
2. STREET ADDRESS: 4 SEA HORSE LN	1.2 NAME
3. CITY-STATE-ZIP: VERO BEACH FL	1.3 STREET ADDRESS
4. NAME: ZORC, ARLYNE A	1.4 CITY-STATE-ZIP
5. STREET ADDRESS: 4 SEA HORSE LN	2.1 TITLE
6. CITY-STATE-ZIP: VERO BEACH FL	2.2 NAME
7. NAME: ZORC, TIMOTHY J.	2.3 STREET ADDRESS
8. STREET ADDRESS: 3907 58 CIR	2.4 CITY-STATE-ZIP
9. CITY-STATE-ZIP: VERO BEACH FL	3.1 TITLE
10. NAME: ZORC, KENNETH R.	3.2 NAME
11. STREET ADDRESS: 2730 FLIGHT SAFETY DR. SUITE 100	3.3 STREET ADDRESS
12. CITY-STATE-ZIP: VERO BEACH FL	3.4 CITY-STATE-ZIP
13. NAME: [Blank]	4.1 TITLE
14. STREET ADDRESS: [Blank]	4.2 NAME
15. CITY-STATE-ZIP: [Blank]	4.3 STREET ADDRESS
16. NAME: [Blank]	4.4 CITY-STATE-ZIP
17. STREET ADDRESS: [Blank]	5.1 TITLE
18. CITY-STATE-ZIP: [Blank]	5.2 NAME
19. NAME: [Blank]	5.3 STREET ADDRESS
20. STREET ADDRESS: [Blank]	5.4 CITY-STATE-ZIP
21. CITY-STATE-ZIP: [Blank]	6.1 TITLE
22. NAME: [Blank]	6.2 NAME
23. STREET ADDRESS: [Blank]	6.3 STREET ADDRESS
24. CITY-STATE-ZIP: [Blank]	6.4 CITY-STATE-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. 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:

Kenneth R. Zorc

Kenneth R. Zorc (VS)

2/6/96

407-567-1953#6

CR2E034 (12/95)