

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 # **F44608** (0)
1. Corporation Name
NORFLEET & SANDERS DEVELOPMENT CORPORATION



Principal Place of Business
**% E.D. NORFLEET
ROUTE 1, BOX 28
NEWBERRY FL 32669**

Mailing Address
**% E.D. NORFLEET
ROUTE 1, BOX 28
NEWBERRY FL 32669**

3. Date Incorporated or Qualified
09/15/1981

3a. Date of Last Report
01/25/1995

4. FEI Number
59-2231753

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 **E.D. Norfleet**
Suite, Apt. #, etc. **2808 NW SRWS**
22 **Newberry, FL**
City & State
23 **32669**
Zip
24 **USA**
Country

2a. Mailing Address
26 **E.D. Norfleet**
Suite, Apt. #, etc. **2808 NW SRWS**
27 **Newberry, FL**
City & State
28 **32669**
Zip
29 **USA**
Country

9. Name and Address of Current Registered Agent

**NORFLEET, E.D.
ROUTE 1, BOX 28
NEWBERRY FL 32669**

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 607.1506, 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 **E.D. Norfleet** DATE **4/19/96**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
T	SANDERS, VIRGINIA N	137 DOUGLAS STREET	HOMASASSA FL	☐
S	NORFLEET, CAROL PHYLLIS	RT 1 BOX 28	NEWBERRY FL	☐
V	SANDERS, JAMES T SR	137 DOUGLAS STREET	HOMASASSA FL	☐
P	NORFLEET, E D	RT 1 BOX 28	NEWBERRY FL	☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	☐	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	☐	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	☐	☐
61 TITLE	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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **E.D. Norfleet** DATE **4/19/96** Day/Phone **904-472-2448**

CR2E034 (12/95)