

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F49225

(8)

1. Corporation Name

SAFE PAK PARCEL CENTRE, INC.



Principal Place of Business

Mailing Address

% WILLIAM M COAKLEY
1601 BANYAN ROAD
BOCA RATON FL 33432

% WILLIAM M COAKLEY
1601 BANYAN ROAD
BOCA RATON FL 33432

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., etc.

Suite, Apt., etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

9. Name and Address of Current Registered Agent

COAKLEY, WILLIAM M
1601 BANYAN ROAD
BOCA RATON FL 33432

3. Date Incorporated or Qualified

10/06/1981

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2137839

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 607.1603, 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 607.0503, Florida Statutes.

SIGNATURE

Signature of person designated to receive notices for the corporation

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

PD
COAKLEY, WILLIAM M
1601 BANYAN ROAD
BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

EVP
COAKLEY, RUTH
1601 BANYAN ROAD
BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

ST
COAKLEY, RUTH
1601 BANYAN ROAD
BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY, ST, ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP

☐ Change

☐ Addition

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY, ST, ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY, ST, ZIP

☐ Change

☐ Addition

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY, ST, ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY, ST, ZIP

☐ Change

☐ Addition

71. TITLE
72. NAME
73. STREET ADDRESS
74. CITY, ST, ZIP

81. TITLE
82. NAME
83. STREET ADDRESS
84. CITY, ST, ZIP

☐ Change

☐ Addition

91. TITLE
92. NAME
93. STREET ADDRESS
94. CITY, ST, ZIP

101. TITLE
102. NAME
103. STREET ADDRESS
104. CITY, ST, ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this form 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 manager or trustee empowered to prepare this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William M Coakley

3/25/96 407-392-8844

CR2E034 (12/95)