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Jan 27 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F93000000716 (1)

1. Corporation Name

ADVANTOR CORPORATION

Principal Place of Business

424 NO. WASHINGTON ST.  
ALEXANDRIA VA 22314

Mailing Address

424 NO. WASHINGTON ST.  
ALEXANDRIA VA 22314-2312



2. Principal Place of Business

2a. Mailing Address

21 6101 LAKE ELLENOR DR.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

City & State

23

ORLANDO, FL

28

Zip

Country

Zip

Country

24

32809

25

U.S.A

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/01/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

58-2028229

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

TERRY L. MCCOLLOUGH, ESQ.  
538 EAST WASHINGTON ST  
ORLANDO FL 32801

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CDP  
NAME FLEMMING, HARRY S  
STREET ADDRESS 424 NO. WASHINGTON ST  
CITY - ST - ZIP ALEXANDRIA VA 22314

TITLE DVS  
NAME LANDIS, JANE A  
STREET ADDRESS 424 NO. WASHINGTON ST  
CITY - ST - ZIP ALEXANDRIA VA 22314

TITLE V  
NAME ROLLINS, FRED A  
STREET ADDRESS 6101 LAKE ELLENOR DRIVE  
CITY - ST - ZIP ORLANDO FL 32809

TITLE T  
NAME CLIFTON, RICHARD W  
STREET ADDRESS 6101 LAKE ELLENOR DRIVE  
CITY - ST - ZIP ORLANDO FL 32809

TITLE VP  
NAME WHIRLEY, JEFFREY J  
STREET ADDRESS 6101 LAKE ELLENOR DR.  
CITY - ST - ZIP ORLANDO FL

TITLE VP  
NAME HALEY, MARY E  
STREET ADDRESS 6101 LAKE ELLENOR DR.  
CITY - ST - ZIP ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRESIDENT  
1.2 NAME H. TODD FLEMMING  
1.3 STREET ADDRESS 6101 LAKE ELLENOR DR.  
1.4 CITY - ST - ZIP ORLANDO, FL 32809

2.1 TITLE VICE PRESIDENT  
2.2 NAME RANDALL L. TIDMORE  
2.3 STREET ADDRESS 6101 LAKE ELLENOR DR.  
2.4 CITY - ST - ZIP ORLANDO, FL 32809

3.1 TITLE VICE PRESIDENT  
3.2 NAME HARRY LEE  
3.3 STREET ADDRESS 6101 LAKE ELLENOR DR.  
3.4 CITY - ST - ZIP ORLANDO, FL 32809

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

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

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

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Jane A. Landis  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97  
Date

703/549-3900  
Daytime Phone

CR2E034 (9/96)