

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 20 AM 8:46

DOCUMENT # F94000001737 (5)

1. Corporation Name

HOPATT INVESTMENTS, INC.

Principal Place of Business

2801 FRUITVILLE ROAD
SUITE 260
SARASOTA FL 34237

Mailing Address

2801 FRUITVILLE ROAD
SUITE 260
SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

04/06/1994

3a. Date of Last Report

4. FEI Number

61-1248577

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

9. Name and Address of Current Registered Agent

MASCHINO, ROSE
2831 RINGLING BLVD.
SUITE 118E
SARASOTA FL 34237

10. Name and Address of New Registered Agent ADDRESS CHG.

81 Name

Maschino Rose

82 Street Address (P.O. Box Number is Not Acceptable)

2801 Fruitville Rd.

83

Ste. 260

84 City

Sarasota

FL

85 Zip Code

34237

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 607.0506, Florida Statutes.

SIGNATURE

Rose Maschino Rose Maschino

1/12/95

Signature, if not printed name of registered agent and date of appointment.

(NOTE: Registered Agent signature required when terminating)

12. OFFICERS AND DIRECTORS

TITLE PDC
NAME HO, CHARLES
STREET ADDRESS 2831 RINGLING BLVD., #118E
CITY-ST-ZIP SARASOTA FL 34237

TITLE STD
NAME PATTERSON, JAMES
STREET ADDRESS 10000 SHELBYVILLE RD.
CITY-ST-ZIP LOUISVILLE KY 40222

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P/O

1.2 NAME

Ho, Charles

1.3 STREET ADDRESS

2801 Fruitville Rd, Ste. 260

1.4 CITY-ST-ZIP

Sarasota, FL 34237

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 the 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:

Charles Ho Director

1/12/95 813-951-6987