

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000005730 (6)

1. Corporation Name

FLORIDA DISCOVERY STORE, INC.

Principal Place of Business

**15046 BELTWAY
DALLAS TX 75244**

Mailing Address

**15046 BELTWAY
DALLAS TX 75244**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/04/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

75-2374455

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. 100.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PTD
ROLATER, J R
15046 BELTWAY DR.
DALLAS TX 75244**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**S
WOMMACK, PAUL
2002 TIMBERLOCH PL., #260
THE WOODLANDS TX 77380**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
MITCHELL, GEORGE
2002 TIMBERLOCH PL., #260
THE WOODLANDS TX 77380**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
VITALE, ALAN
2002 TIMBERLOCH PL., #260
THE WOODLANDS TX 77380**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
RUSSELL, E T
2002 TIMBERLOCH PL., #260
THE WOODLANDS TX 77380**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
RUSSELL, E T
2002 TIMBERLOCH PL., #260
THE WOODLANDS TX 77380**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

Change Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

Change Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

Change Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Change Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 110.07(3)(b), Florida Statutes. I further certify that the information included in 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 applicable, or in an attachment with an address.

SIGNATURE:

[Handwritten Signature]

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/95

Date

(214) 490-8299

Telephone #