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PROFIT CORPORATION ANNUAL REPORT

1997

712



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94172

(6)

FIRST AMERICAN INTERNATIONAL, INC.

FILED

Feb 10 1997 8:00am

Secretary of State

| Principal Place of Business Mailing Address | | | | | | | | | |
|---|---|--|---------------------|-----------------------------------|-----------------------|--|-------------|---------------------------------|--------------------|
| 3931 SW COL | | | 3931 SW COLLEGE RD | | | | | | |
| OCALA FL 34474 | | OCALA FL 34474-5713 | | | | | | | |
| US | | U\$ | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 08/11/1982 | | ite of Last F 14/1996 | Report |
| | lace of Business | 2a. Mailing Address | h1 | | | 4. FEI Number | FO 0040704 | | |
| Suite, Apt. | # pic | Suite Apt # ate | Suite, Apt. #, etc. | | | 59-2212794 | | | ot Applicable |
| 22 | , o.o. | | 27 | | | 5. Certificate of Status Desired | | | Additional equired |
| City & Stat | θ | City & State | | | | 6. Election Campaign Financing | | | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | | to Fees |
| Zip | Country Zip Cou | | | ntry | | 8. This corporation has liability for in | | | . 199.032, |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | | | | Florida Statutes Yes No | | | |
| LAN | E, GLENN E | it Hegistered Agent | | 81 | Name | 10. Name and Address of New Reg | istered / | Agent | |
| | 1 SW COLLEGE RD | | Ľ | | | | | | |
| | LA FL 34474 | | 82 Street Ac | | | ess (P.O. Box Number is Not Acceptable | e) | | |
| 007 | Directory. | | ŀ | 83 | | | | | |
| | | | - | | | | | | |
| | | | | 84 | City | | FL | 1 1 ' | Code |
| 11. Pursuant | to the provisions of Sections 607.050 | 02 and 607.1508, Florida Statute | s, the ab | ove | -named corpo | oration submits this statement for the pu | rpose of | changing i | ts registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 | | | | | | | | | |
| 12. | Signature, typed or printed name of registered age | ent and title if applicable. (NOTE D DIRECTORS | | Age | it signature required | | DATE | DIDECTOR | |
| TITLE | PD | DELETE | 13. | F | | ADDITIONS/CHANGES TO OFFICE | HS AND | Change | Addition |
| NAME | LANE, GLENN E. | | 1.2 NAM | | - | • | | Change . | |
| STREET ADDRESS | 3931 SW COLLEGE RD | | | 13 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | OCALA FL | | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | ST | DELETE | 2 1 TITL | | | | | Change | Addition |
| NAME | LANE, GLENN E. | | 2.2 NAM | MΕ | | | | | |
| STREET ADDRESS | 3931 SW COLLEGE RD | | 2.3 STR | REET A | ADDRESS | | | | |
| CITY-ST-ZIP | OCALA FL | | 2. 4 CIT | Y - ST | í - ZIP | | | | |
| TITLE | | ☐ DELETE | | 3.1 THILE | | | | Change | Addition |
| NAME Street address | | | 3.2 NAN | | . Donena | · | .4 | | ľ |
| CITY-ST-ZIP | | | 3.3 STREET ADDRESS | | | | | | |
| TITLE | DELETE | | | 3.4. CITY - ST - ZIP 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4. 2 NAI | | | | | 01.00.B0 | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 C(1) | Y-ST | · ZIP | | | | |
| TITLE | | ☐ DELETE | 5.1 TITL | .E | | • | | Change | Addition |
| NAME | | | 5.2 NAN | M E | | | | |] |
| STREET ADDRESS | | | 5.3 STR | EE1 A | ADDRESS | | | | |
| CITY-ST-ZIP | | T DECETE | 5.4 CITY | | -ZIP | | | T | |
| ; TITLE | | ☐ DELETE | 6.1 TITL | | | | | ☐ Change | ☐ Addition |
| NAME Street address | | | 6.2 NAM | | L CONTROL | | | | |
| CITY-ST-ZIP | | | | | ADDRESS | | | | ļ |
| | ortification information according | et antique Alexa d'illes et al en es et a est l'ille | 6.4 CITY | r-SI- | ·ZIP | 0.0000000000000000000000000000000000000 | | | |

I do hereby certify that the information supplied with this filling 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.