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

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G05353** **(9)**

1. Corporation Name

**AMERICAN WAY SERVICE CORPORATION, S.E.**

| Principal Place of Business | Mailing Address |
|---|---|
| 100 EAST SAMPLE ROAD,ROOM 120<br>~~P.O. BOX 640~~<br>~~LIGHTHOUSE POINT FL 33064-3574~~<br>Pompano Beach | 100 EAST SAMPLE ROAD,ROOM 120<br>~~P.O. BOX 640~~<br>~~LIGHTHOUSE POINT FL 33064-3574~~ |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **09/30/1982**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business
21: 100 E Sample Rd
22 Suite, Apt. #, etc.: Suite #120
23 City & State: Pompano Beach, FL
24 Zip: 33064
25 Country: USA

2a. Mailing Address
26: 100 E. Sample Rd
27 Suite, Apt. #, etc.: Suite #120
28 City & State: Pompano Beach, FL
29 Zip: 33064
30 Country: USA

4. FEI Number: **59-2227576** ☐ 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

**DAILEY, NANCY K.**
**100 E SAMPLE RD**
**STE 120**
**POMPANO BCH FL 33064**

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: Nancy K Dailey — Nancy K. Dailey — 4-27-95
(typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required where applicable) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | PD | 11 TITLE | ☐ Change ☐ Addition |
| NAME | WARMUS,THOMAS A. | 12 NAME | |
| STREET ADDRESS | 2310 N.E. 33RD ST. | 13 STREET ADDRESS | |
| CITY ST ZIP | LIGHTHOUSE POINT FL | 14 CITY ST ZIP | |
| TITLE | STD | 21 TITLE | ☐ Change ☐ Addition |
| NAME | DAILEY,NANCY K. | 22 NAME | |
| STREET ADDRESS | 2310 N.E. 33RD ST. | 23 STREET ADDRESS | |
| CITY ST ZIP | LIGHTHOUSE POINT FL | 24 CITY ST ZIP | |
| TITLE | VD | 31 TITLE | ☐ Change ☐ Addition |
| NAME | MUIR, MAE A. | 32 NAME | |
| STREET ADDRESS | 2310 N.E. 33RD ST. | 33 STREET ADDRESS | |
| CITY ST ZIP | LIGHTHOUSE POINT FL | 34 CITY ST ZIP | |
| TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY ST ZIP | | 44 CITY ST ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY ST ZIP | | 54 CITY ST ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY ST ZIP | | 64 CITY ST ZIP | |

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)(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:** Nancy K Dailey — Nancy K. Dailey — 4-27-95 — 305-942-6724
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL: OFFICER OR DIRECTOR — Date — Daytime Phone #

0107810 CP