

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Samuel B. Kistner
Secretary of State
DIVISION OF CORPORATIVES

APPROVED
AND
FILED

95 MAY -1 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G12079 (1)

1. Corporation Name

CLASSIC KITCHENS AND BATHS, INC.

Principal Place of Business
1455 SO ORLANDO AVE
MAITLAND FL 32751

Maining Address
1455 SO ORLANDO AVE
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/06/1982	3a. Date of Last Report 05/01/1994
4. FET Number 59-2250865	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 the Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. # etc. 22 City & State 23 Zip 24 Country	2a. Maining Address 26 Sute, Apt. # etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

MASSEY, GARY E.
112 W CITRUS STREET
ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL 86 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 of Registered Agent or Registered Agent's Representative

Signature of President or Secretary of Corporation

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	☐ Change ☐ Addition
NAME	TACKETT, HUGH	2. NAME	
STREET ADDRESS	514 STEPHANIE COURT	3. STREET ADDRESS	
CITY, ST, ZIP	LAKE MARY FL	4. CITY, ST, ZIP	
TITLE	STD	5. TITLE	☐ Change ☐ Addition
NAME	TACKETT, BRENDA	6. NAME	
STREET ADDRESS	514 STEPHANIE COURT	7. STREET ADDRESS	
CITY, ST, ZIP	LAKE MARY FL	8. CITY, ST, ZIP	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(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 liquidator empowered to make this report as required by Chapter 149, Florida Statutes, and that my name appears in Block 1, 2 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Brenda L. Tackett, Sec. & Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/95 409 6281792