

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G13808** (2)
1. Corporation Name
WINTER PARK SCREEN PRINT, INC.



Principal Place of Business 1112 SOLANA AVENUE P. O. BOX 2338 (WINTER PARK, FL 32780) WINTER PARK FL 32789	Mailing Address PO BOX 2338 WINTER PARK FL 32780-2338 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/16/1982	3a. Date of Last Report 04/11/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2244028	Applied For ☐ Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

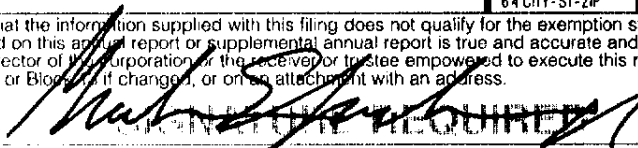
9. Name and Address of Current Registered Agent JACKSON, GRAHAM E., JR. 220 BLOSSOM LANE WINTER PARK FL 32789				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85	Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	M	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	JACKSON, GRAHAM E, JR			1.2 NAME			
STREET ADDRESS	1112 SOLANA AVENUE			1.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			1.4 CITY-ST-ZIP			
TITLE	DPV	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	JACKSON, GRAHAM E, JR			2.2 NAME			
STREET ADDRESS	1112 SOLANA AVENUE			2.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			2.4 CITY-ST-ZIP			
TITLE	STC	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	JACKSON, GRAHAM E, JR			3.2 NAME			
STREET ADDRESS	1112 SOLANA AVENUE			3.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing 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:  4-10-97 (407) 629-1040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

CR2E034 (9/96)