

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G23807** (2)
1. Corporation Name
MY PRINTER, INC.



Principal Place of Business
**105 12TH PLACE SE
VERO BEACH FL 32962**

Mailing Address
**105 12TH PLACE SE
VERO BEACH FL 32962**

3. Date Incorporated or Qualified
02/14/1983

3a. Date of Last Report
05/01/1995

2. Principal Place of Business
21 **669-2nd LANE**
Suite, Apt. #, etc.

2a. Mailing Address
26
Suite, Apt. #, etc.

4. FEI Number
59-2261935

Applied For
Not Applicable

22
City & State
VERO BEACH FL

27
City & State

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

23
Zip
32962

24
Country
USA

28
Zip

29
Country

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**GARRIS, CHARLES E.
817 BEACHLAND BLVD.
P. O. BOX 3406
VERO BCH. FL 32964**

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)

(Print: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MYERS, TERRY L	
STREET ADDRESS	105 12TH PLACE SE	
CITY-ST-ZIP	VERO BEACH, FL 0	
TITLE	TSD	<input type="checkbox"/> DELETE
NAME	WARD, ELIZABETH L	
STREET ADDRESS	105 12TH PLACE SE	
CITY-ST-ZIP	VERO BEACH, FL 0	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WARD, ELIZABETH A	
STREET ADDRESS	2200 OAK DR	
CITY-ST-ZIP	FT PIERCE, FL 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	NEGHERBON, JOHN	
STREET ADDRESS	5995 23RD ST	
CITY-ST-ZIP	VERO BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(k), 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: *Elizabeth L. Ward* Secty/Treas. 4/3/96 (407) 569-2665
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ELIZABETH L. WARD

CR2E034 (12/95)