FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **G27697** **(3)**

1. Corporation Name

R & B GALE CORP.

Principal Place of Business	Mailing Address
5609 E. HILLSBOROUGH AVE. TAMPA FL 33610-5414	5609 E. HILLSBOROUGH AVE. TAMPA FL 33610-5414

3. Date Incorporated or Qualified: **03/14/1983**
3a. Date of Last Report: **01/18/1995**

4. FEI Number: **59-2271963** ☐ 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

2. Principal Place of Business
21 | 22 Street Address | 23 City & State | 24 Zip | 25 County

2a. Mailing Address
26 | 27 Street Address | 28 City & State | 29 Zip | 30 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

KRANENDONK, GARY
5609 E. HILLSBOROUGH AVE.
TAMPA FL 33610-5414

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 or 617.1008, 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 or 617.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE: D	☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME: KRANENDONK, ROBERT		12 NAME	
STREET ADDRESS: 18811 TOURNAMENT TRAIL		13 STREET ADDRESS	
CITY-ST-ZIP: TAMPA FL		14 City-St-Zip	
2 TITLE: PTD	☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME: KRANENDONK, BARBARA A.		22 NAME	
STREET ADDRESS: 18811 TOURNAMENT TRAIL		23 STREET ADDRESS	
CITY-ST-ZIP: TAMPA FL		24 City-St-Zip	
3 TITLE: V	☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME: KRANENDONK, GARY		32 NAME	
STREET ADDRESS: 1818 STAYSAIL DR.		33 STREET ADDRESS	
CITY-ST-ZIP: VALRICO FL		34 City-St-Zip	
4 TITLE: V	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME: KRANENDONK, JAMES		42 NAME	
STREET ADDRESS: 3180 LAKE SAXON DR.		43 STREET ADDRESS	
CITY-ST-ZIP: LAND-O-LAKES FL		44 City-St-Zip	
5 TITLE: S	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME: ESPOSITO, AMY		52 NAME	
STREET ADDRESS: 1943 REVOLUTIONARY COURT		53 STREET ADDRESS	
CITY-ST-ZIP: PHOENIXVILLE PA		54 City-St-Zip	
6 TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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(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 added above.

SIGNATURE: Gary Kranendonk Gary Kranendonk 1/18/96 813-623-5478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)