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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 1:38

DOCUMENT # G37169

(1)

1. Corporation Name

R. S. ZIMNY AND COMPANY, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business

Mailing Address

7257 DEERIDGE RD
SARASOTA FL 34241

7257 DEERIDGE RD
SARASOTA FL 34241

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

3. Date Incorporated or Qualified

05/05/1983

3a. Date of Last Report

04/28/1994

4. FEI Number

59-2265517

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

ZIMNY, ROBERT S.
4665 ALEXANDER POPE LANE
SARASOTA FL 33563

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)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PVD
NAME ZIMNY, ROBERT S.
STREET ADDRESS 4665 ALEXANDER POPE LANE
CITY-ST-ZIP SARASOTA FL

1.1 TITLE PD
1.2 NAME ZIMNY, ROBERT S.
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 34241

☒ Change ☐ Addition

TITLE STD
NAME ZIMNY, CAROLYN S.
STREET ADDRESS 4665 ALEXANDER POPE LANE
CITY-ST-ZIP SARASOTA FL

2.1 TITLE VD
2.2 NAME ZIMNY, CAROLYN S.
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 34241

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE STD
3.2 NAME HOGAN, CHERYL A.
3.3 STREET ADDRESS 6911 STETSON ST CIR.
3.4 CITY-ST-ZIP SARASOTA, FL 34243

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

X ROBERT S. ZIMNY

(Signature and typed or printed name of signing officer or director)

Robert S. Zimny

1-16-95

813-379-4646