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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

SIGNATURE:

H06855

(1)

WARREN	LINDSFY	ALITO	SALES	INC

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Principal Place of	of Business	Mailing Address				181 BIII 81811 G1811 GIBIL 81811 BIBIL BIBIL
606 N. 11TH QUINCY FL 3		606 N. 11TH STREE QUINCY FL 32351	т			
					3. Date Incorporated or Qualified 06/07/1984	3a. Date of Last Report 01/30/1995
2. Principal Place	e of Business	2a. Mailing Address			4. FEI Number	Applied For
21	ata	26			59-2420643	Not Applicable
Suite, Apt. #,	eic.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	· · · · · · · · · · · · · · · · · · ·		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
- Ζφ - L	Country	<i>Ζ</i> φ	Country	,	8. This corporation has liability for i	
24	9. Name and Address of Cur	29	30		Florida Statutes Yes 10. Name and Address of New R	
	5. Name and Address of Cur	rent negistered Agent	81	Name	IU. Name and Address of New A	agistered Agent
LINDSE	Y, WARREN					
	11TH STREET		82	Street Add	iress (P.O. Box Number is Not Acceptab	·e)
	FL 32351		83			
			84	Ca.,		las I % Codo
				"		FL 85 Zip Code
or registered familiar with, SIGNATURE	d agent, or both, in the State of F , and accept the obligations of, S	lorida. Such change was authoriz ection 607.0505, Florida Statutes	red by the corp s.	oration's boa	oration submits this statement for the pur ard of directors. I hereby accept the appo	bintment as registered agent. I am
12.	gnatin, typica or printed name of registered at	gent and title it applicable (NO AND DIRECTORS	OTE: Flagistered Age	nt signature require		DATE
TILE	P	DELETE	1 1 TITLE		ADDITIONS/CHANGES TO OFFI	Change Addition
NAME:	LINDSEY, WARREN		1.2 NAME			G onlings G 7000001
STREET ADDRESS	606 N 11TH ST.			F ADDRESS		
C+1 Y - S1 - Z+P	QUINCY FL		14 City-3			
T-TLF	ST	☐ DELETE	2 1 THTLE			Change Addition
NAME	LINDSEY, AMY		2 2 NAME			
STREET ADDRESS	606 N 11TH ST.		23 STREE	ADDRESS		
Caly-St-7-P	QUINCY FL		24 CHY-	ST-ZIP		
T-TLF		☐ DELETE	3 1 TITLE		•	· / Change Addition
NAME			3 2 NAMF			
STREET ADDRESS				T ADDRESS		
CHY+ST+ZiP TILLE		DELETE	3.4 CHY-1	01-211		Change Addition
NAM:			4 2 NAME			Country Country
STREET ADDRESS				I ADDRESS		
Cdy-St-ZP			4.4 CITY-			
TILE		☐ DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAME			
SUBEEL ADDRESS			53 STREE	RESERDE		
CHY ST-7P			5.4 CITY-1	ST-ZIP		
DIFLE		DELETE	6 1 TITLE			Change Addition
NAME			6 2 NAME			
STREET ADORESS				ADDRESS		
- 097 St Ze - 14 . I do hereby e	certify that the information supplies	ed with this filing is voluntarily for	64 CITY-:	s not qualify	for the exemption stated in Section 119.	07/3)/k) Florida Statutos Uturthos
certify that ti oath; that I a appears in E	he information indicated on this a ani an officer or director of the o Book 12 or Block 12 if changed	nnual report or supplemental and reportion or the receiver or ruste or on an attachment with an add	nual report is tri e empowered less.	ue and accur to execute th	ate and that my signature shall have the his report as required by Chapter 607, Flo	same legal effect as if made under orida Statutes; and that my name