

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 # H20056 (8)

1. Corporation Name

CROSLY CORPORATION



Principal Place of Business

% GILBERT CROSLY  
BOX 878, U.S. HWY 301, SIX MILES SOUTH  
STARKE FL 32091

Mailing Address

% GILBERT CROSLY  
BOX 878, U.S. HWY 301, SIX MILES SOUTH  
STARKE FL 32091

3. Date Incorporated or Qualified  
09/07/1984

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2534002

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

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

CROSLY, GILBERT  
BOX 878, U.S. HWY 301, SIX MILES SOUTH  
STARKE FL 32091

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 of agent or person named as registered agent in this report.

Signature of Registered Agent (Signature required when registering).

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
CROSLY, GILBERT  
STREET ADDRESS  
US HWY.301, 6 MI.SOUTH  
CITY-ST-ZIP  
STARKE FL

TITLE ☐ DELETE

NAME  
CROSLY, KIRBY  
STREET ADDRESS  
US HWY.301, 6 MI.SOUTH  
CITY-ST-ZIP  
STARKE FL

TITLE ☒ DELETE

NAME  
ROBINSON, ALBERT E.  
STREET ADDRESS  
U.S. HWY 301 5 MI SOUTH  
CITY-ST-ZIP  
STARKE FL

TITLE ☐ DELETE

NAME  
CROSLY, ALICE  
STREET ADDRESS  
US HWY. 301, 6 MI.SOUTH  
CITY-ST-ZIP  
STARKE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-22-96

352-468-1150

CR2E034 (12/95)