

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # H39831 (3)

MARK FETZER, INC.

Principal Place of Business

Mailing Address

PO DRAWER A
VERO BCH FL 32961
US

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VERO BCH FL 32961
US

2. Principal Place of Business		2a. Mailing Address	
21	2310 N. Old Dixie Hwy	26	P.O. Box 4362
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22		27	
	City & State		City & State
23	St. Pierre FL	28	St. Pierre
	Zip		Zip
24	34940	29	34948
	Country		Country
25	USA	30	USA

3. Date Incorporated or Qualified 01/28/1985		3a. Date of Last Report 04/24/1995	
4. FEI Number 59-2495274		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

FETZER, MARK
840 - 19TH ST.
VERO BEACH FL 32960

81	Name	Fetzer Mark
82	Street Address (P.O. Box Number is Not Acceptable)	2310 N. Old Dixie Hwy
83		
84	City	Ft. Pierce
	FL	85
		34946

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, 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 reinstating)

DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PDT	☐ DELETE
NAME	FETZER, MARK	
STREET ADDRESS	886-44TH COURT	
CITY-ST-ZIP	VERO BEACH FL	

TITLE	VDS	☐ DELETE
NAME	FETZER, DIANE	
STREET ADDRESS	886 - 44TH COURT	
CITY - ST - ZIP	VERO BEACH FL	

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PDT**
1.2 NAME **Fetzer, Mark**
1.3 STREET ADDRESS **2505 N. Old Dixie Hwy**
1.4 CITY - ST - ZIP **Ft. Pierce, FL 34940**

2.1 TITLE	VDS	☒ Change	☐ Addition
2.2 NAME	Fetzer, Diane		
2.3 STREET ADDRESS	2505 N. Dixie Hwy		
2.4 CITY-ST-ZIP	Ft. Pierce, FL 34949		

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3. STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	100001803971
4.4 CITY - ST - ZIP	--05/02/96-- 01002--010

5.1 TITLE	***200.00	☐ Change	☐ Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			

6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	5-1-96 MIL

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

Date _____

David's Phone

CR2E034 (12/95)