

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:42

DOCUMENT # **H63947** (6)

1. Corporation Name

5-L ENTERPRISES, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
**1430 BRISTOL PARK PL.
HEATHROW FL 32746**

Mailing Address
**1430 BRISTOL PARK PL.
HEATHROW FL 32746**

3. Date Incorporated or Qualified
06/26/1985

3a. Date of Last Report
01/19/1994

2. Principal Place of Business
21 905 PADDINGTON TERR. 905 PADDINGTON TERR.

4. FEI Number
59-2545112

Suite, Apt. #, etc.
22 LAKE MARY, FL.

Suite, Apt. #, etc.
27 LAKE MARY, FL.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State
23

City & State
28

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 32746

Zip
29 32746

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

LINDER, GORDON
~~1430 BRISTOL PARK PL.~~ 905 PADDINGTON TERR.
~~HEATHROW FL 32740~~ LAKE MARY, FL.
32746

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 607.0504, Florida Statutes.

SIGNATURE

Gordon Linder

Signature. Insert or printed name of registered agent, if not applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
PD
NAME
LINDER, GORDON
STREET ADDRESS
~~1430 BRISTOL PARK PL.~~ 905 PADDINGTON TERR.
CITY - ST - ZIP
~~HEATHROW FL~~ LAKE MARY, FL.

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE
STD
NAME
LINDER, RITA
STREET ADDRESS
~~1430 BRISTOL PARK PL.~~ 905 PADDINGTON TERR.
CITY - ST - ZIP
~~HEATHROW FL~~ LAKE MARY, FL.

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 110.07(3)(b), 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 attached sheet with an address.

SIGNATURE:

Gordon Linder

G. LINDER

1/19/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

System Form 8