

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 # **H86951 (1)**

1. Corporation Name
MOLSICK & COMPANY, INC.



Principal Place of Business: **1604 OCEAN DUNES TERR DAYTONA BEACH FL 32118**
Mailing Address: **1604 OCEAN DUNES TERR DAYTONA BEACH FL 32118**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/20/1985	3a. Date of Last Report 05/01/1995
21 2358 Landing Way <small>Suite, Apt. #, etc.</small>	26 2358 Landing Way <small>Suite, Apt. #, etc.</small>			4. FEI Number 59-2614358	Applied For Not Applicable
22	27			5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Palm Harbor FL <small>City & State</small>	28 Palm Harbor, FL <small>City & State</small>			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 34684 <small>Zip</small>	25 Pinellas <small>Country</small>	29 34684 <small>Zip</small>	30 Pinellas <small>Country</small>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MOLSICK, JACQUELINE C. 1604 OCEAN DUNES TERRACE DAYTONA BEACH FL 32118				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)	2358 Landing Way		
				83			
				84 City	Palm Harbor	85 State	FL

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: *Jacqueline C. Molsick* **JACQUELINE C. MOLSICK** DATE: **4/28/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOLSICK, JACQUELINE C.	1.2 NAME	
STREET ADDRESS	1604 OCEAN DUNES TERRACE	1.3 STREET ADDRESS	2358 Landing Way
CITY-ST-ZIP	DAYTONA BEACH FL 32118	1.4 CITY-ST-ZIP	Palm Harbor FL 34684
TITLE	DST <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOLSICK, ROBERT M.	2.2 NAME	
STREET ADDRESS	1604 OCEAN DUNES TERRACE	2.3 STREET ADDRESS	2358 Landing Way
CITY-ST-ZIP	DAYTONA BEACH FL 32118	2.4 CITY-ST-ZIP	Palm Harbor FL 34684
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: *Jacqueline C. Molsick* **JACQUELINE C. MOLSICK** DATE: **4/28/96** 813 - 771-0204

CR2E034 (12/95)