

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 AM 11:56

DOCUMENT # H87324 (0)

**1. Corporation Name
IDYLLIC, INC.**

Principal Place of Business

**1001 3RD AVE N.
STE 700
BRADENTON FL 34205
US**

Mailing Address

**P. O. BOX 1251
BRADENTON FL 34206
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/27/1985
3a. Date of Last Report 02/08/1994

4. FEI Number 50-2613185
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**

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ **Yes** ☐ **No**

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

9. Name and Address of Current Registered Agent

**CHRISTOPHER, ROBERT E
1001 3RD AVE, N
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

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: Robert E. Christopher (Registered Agent)

(PASTE Registered Agent signature requested when re-registering)

DATE

12. OFFICERS AND DIRECTORS

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**TD
EDWARDS, RONALD L.
907 BETHEL CREEK DRIVE
VERO BEACH, FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**SD
CHRISTOPHER, ROBERT E
3932 RIVERVIEW BLVD, W
BRADENTON FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**D
SMITH, JAN E.
1203 62ND STREET, NW
BRADENTON FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**DC
WEBB, IRA E.
5219 22ND AVENUE WEST
BRADENTON FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

**DP
ZIGULICH, JOSEPH D.
51 TIDY ISLAND BLVD
BRADENTON FL**

**TITLE
NAME
STREET ADDRESS
CITY ST ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP**

☐ **Change** ☐ **Addition**

**21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP**

☐ **Change** ☐ **Addition**

**31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP**

☐ **Change** ☐ **Addition**

**41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP**

☐ **Change** ☐ **Addition**

**51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP**

☐ **Change** ☐ **Addition**

**61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP**

☐ **Change** ☐ **Addition**

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.03(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 on Block 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE:

Robert E. Christopher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT E. CHRISTOPHER

1-11-95 813-248-1040
Date **Phone Number**