

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

**APPROVED
AND
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95 MAR -3 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **H89366** (9)

1. Corporation Name
THE GRASS RAT, INC.

Principal Place of Business Mailing Address

% HAROLD C. BARBER
713 CALIENTE DRIVE
BRANDON FL 33511

% HAROLD C. BARBER
713 CALIENTE DRIVE
BRANDON FL 33511

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 26

State, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 28

Zip Country Zip Country

24 25 29 30

3. Date Incorporated or Qualified **12/07/1985** 3a. Date of Last Report **03/17/1994**

4. FEI Number **59-2606760** 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. 190.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**BARBER, HAROLD C.
713 CALIENTE DRIVE
BRANDON FL 33511**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code **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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

PD
BARBER, HAROLD C.
713 CALIENTE DRIVE
BRANDON FL

SD
BARBER, BARBARA A.
713 CALIENTE DRIVE
BRANDON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief, and that my signature shall have the same legal effect as if made under oath. This filing is effective as of the date of this report or the date of incorporation, whichever is later, unless otherwise specified. I understand that this report is required by Chapter 127, Florida Statutes, and that my name appears on Block 12 of Block 13 of the report or on an attachment with an address.

SIGNATURE: *Harold C. Barber / Harold C. Barber* 2/27/95 813-689-4684

SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR