

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 # J01218 (3)

1. Corporation Name

HANDI-BOY, INC.



Principal Place of Business

233 E. STATE ST.
JACKSONVILLE FL 32202

Mailing Address

233 E. STATE ST.
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified

02/26/1986

3a. Date of Last Report

05/23/1995

2. Principal Place of Business

21 1310 Tradeport Drive

2a. Mailing Address

26 1310 Tradeport Drive

4. FEI Number

59-2747261

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23 Jacksonville, FL

City & State

28 Jacksonville, FL

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

24 32218

Country

25 Duval

Zip

29 32218

Country

30 Duval

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

WARREN, ELLIS
233 E. STATE ST.
JACKSONVILLE FL 32202

81 Name

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

1310 Tradeport Drive

83

84 City

Jacksonville

FL

85 Zip Code

32218

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

Ellis Warren
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04-30-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME WARREN, HAROLD
STREET ADDRESS 233 E. STATE ST.
CITY-ST-ZIP JACKSONVILLE FL 32202

1.1 TITLE PD ☐ Change ☐ Addition
1.2 NAME Warren, Harold L
1.3 STREET ADDRESS 1310 Tradeport Drive
1.4 CITY-ST-ZIP Jacksonville, FL 32218

TITLE ST ☐ DELETE
NAME WARREN, ELLIS
STREET ADDRESS 233 E. STATE ST.
CITY-ST-ZIP JACKSONVILLE FL 32202

2.1 TITLE VD ☐ Change ☒ Addition
2.2 NAME Mak, Tai
2.3 STREET ADDRESS 1310 Tradeport Drive
2.4 CITY-ST-ZIP Jacksonville, FL 32218

TITLE VP ☐ DELETE
NAME WARREN, STEVE
STREET ADDRESS 233 E. STATE ST.
CITY-ST-ZIP JACKSONVILLE FL 32202

3.1 TITLE VD ☐ Change ☐ Addition
3.2 NAME Warren, Steve
3.3 STREET ADDRESS 1310 Tradeport Drive
3.4 CITY-ST-ZIP Jacksonville, FL 32218

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE STD ☐ Change ☐ Addition
4.2 NAME Warren, Ellis
4.3 STREET ADDRESS 1310 Tradeport Drive
4.4 CITY-ST-ZIP Jacksonville, FL 32218

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
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 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:

Ellis Warren
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-30-96

Date

904-741-3030

Daytime Phone #

CR2E034 (12/95)