

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J02153 (1)

1. Corporation Name

OLNEY SALES, INC.



Principal Place of Business

17002 SHADY HILLS RD
P.O. BOX 11103
SPRING HILL FL 34610

Mailing Address

17002 SHADY HILLS RD
P.O. BOX 11103
SPRING HILL FL 34610

3. Date Incorporated or Qualified
03/04/1986

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 17030 SHADY HILLS RD

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 29 Zip Country 30 Zip Country

4. FCI Number

59-2647516

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

OLNEY, WAYNE
1280 PERSIAN AVENUE
SPRING HILL FL 34608

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

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME DP
STREET ADDRESS OLNEY, WAYNE
CITY - ST - ZIP 1280 PERSIAN AVE
SPRING HILL FL

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

TITLE ☐ DELETE
NAME DST
STREET ADDRESS OLNEY, DOROTHY E.
CITY - ST - ZIP 1280 PERSIAN AVE
SPRING HILL FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME T
2.3 STREET ADDRESS OLNEY, DOROTHY E.
2.4 CITY - ST - ZIP 1280 PERSIAN AVE
SPRING HILL, FL 34608

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME V
3.3 STREET ADDRESS SEARLE, JOHN J
3.4 CITY - ST - ZIP 16638 BOSLEY DR
SPRING HILL, FL 34610

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME S
4.3 STREET ADDRESS SEARLE, ROBYN E
4.4 CITY - ST - ZIP 16638 BOSLEY DR
SPRING HILL, FL 34610

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOROTHY E. OLNEY, T, 04/15/96 (813)856-2085

CR2E034 (12/95)