

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

93 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J08492 (7)

1. Corporation Name

ANDREWS COIN LAUNDRY & POOL GAMES, INC.

Principal Place of Business

% JOHN F. ANDREWS
1531 JACKSON BLUFF RD.
TALLAHASSEE FL 32304

Mailing Address

% JOHN F. ANDREWS
1531 JACKSON BLUFF RD.
TALLAHASSEE FL 32304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/10/1986

3a. Date of Last Report

04/28/1994

4. FEI Number

59-2669959

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. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ANDREWS, MARGARET S.
1531 JACKSON BLUFF RD.
TALLAHASSEE FL 32304

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 607.0501, Florida Statutes.

SIGNATURE: *Margaret Andrews Schwan*

(Signature required; printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when transferring)

4/25/95
(DATE)

12. OFFICERS AND DIRECTORS

TITLE	DS
NAME	ANDREWS, MARGARET S.
STREET ADDRESS	1531 JACKSON BLUFF RD.
CITY, ST, ZIP	TALLAHASSEE FL
TITLE	DP
NAME	JOHNSON, MICHAEL S.
STREET ADDRESS	1531 JACKSON BLUFF RD.
CITY, ST, ZIP	TALLAHASSEE FL
TITLE	VP
NAME	JOHNSON, GILBERT
STREET ADDRESS	1531 JACKSON BLUFF RD
CITY, ST, ZIP	TALLAHASSEE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 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)(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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Margaret Andrews

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4/25/95

Chapter Officer's

904 575-2323