

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 # **J09643** (4)

1. Corporation Name
ECONOMY SALES AND SERVICE, INC.



Principal Place of Business: % ROBERT M. BADER, 22232 WESTCHESTER BOULEVARD, PORT CHARLOTTE FL 33952
Mailing Address: 23115 FOSTER AVE, 22232 WESTCHESTER BOULEVARD, CHARLOTTE HARBOR FL 33980, US

3. Date Incorporated or Qualified: 04/17/1986
3a. Date of Last Report: 05/31/1995
4. FET Number: 59-2682121
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

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent

BADER, ROBERT M.
22232 WESTCHESTER BOULEVARD
POST OFFICE BOX 3551
PORT CHARLOTTE FL 33952

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, typed or printed name of registered agent as it should appear (if not applicable, the name of the Registered Agent's signature should appear where necessary) DATE

12. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> DELETE
NAME	KISH, LENA	
STREET ADDRESS	22751 BAYSHORE RD	
CITY - ST - ZIP	CHARLOTTE HARBOR FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	AUCOMPAUGH, ELLANORE	
STREET ADDRESS	3096 BROADPOINT DR.	
CITY - ST - ZIP	PUNTA GORDA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BARBER, JEFFREY	
STREET ADDRESS	456 GRIFFITH ST.	
CITY - ST - ZIP	PUNTA GORDA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LASSEY, VIRGINIA	
STREET ADDRESS	29345 PINE VILLA CR	
CITY - ST - ZIP	PUNTA GORDA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Bruce Warram	
1.3 STREET ADDRESS	3624 Islandview Dr.	
1.4 CITY - ST - ZIP	Punta Gorda, FL 33982	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Jeffrey P. Barber* Vice President 32996 (941) 625-2706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)