

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, FL 32399
Secretary of State
Tallahassee, FL 32399-0001

APPROVED
AND
FILED

63 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J36577**

(1)

To: Corporation Name:

PRIEST, INC.

Principal Place of Business:

**% R. O. PRIEST
814 1/2 EAST ATLANTIC AVE.
DELRAY BEACH FL 33483-5330**

Managing Agent:

**% R. O. PRIEST
814 1/2 EAST ATLANTIC AVE.
DELRAY BEACH FL 33483-5330**

(DO NOT WRITE IN THIS SPACE)

3. Date of Incorporation or Qualification 10/07/1986	3a. Date of Last Report 06/15/1994
4. FEI Number 59-2221012	Applied Fee 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. 199.33? Florida Statutes. ☐ Yes ☐ No	

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

9. Name and Address of Current Registered Agent

**PRIEST, R. O.
814 1/2 EAST ATLANTIC AVENUE
DELRAY BEACH FL 33444**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 227, 228, and 229, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of 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 a registered agent under Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PD PRIEST, R. O. 814 1/2 E. ATLANTIC AVE DELRAY BEACH FL	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS		2. STREET ADDRESS	☐ Change ☐ Addition
3. CITY & STATE		3. CITY & STATE	☐ Change ☐ Addition
4. NAME		4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS		5. STREET ADDRESS	☐ Change ☐ Addition
6. CITY & STATE		6. CITY & STATE	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	☐ Change ☐ Addition
9. CITY & STATE		9. CITY & STATE	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	☐ Change ☐ Addition
12. CITY & STATE		12. CITY & STATE	☐ Change ☐ Addition
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	☐ Change ☐ Addition
15. CITY & STATE		15. CITY & STATE	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. STREET ADDRESS		17. STREET ADDRESS	☐ Change ☐ Addition
18. CITY & STATE		18. CITY & STATE	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and is not equally for the exemption stated in Section 199.33(2)(b), Florida Statutes. I further certify that the information submitted 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 not the principal officer of the corporation, the registered business professional to complete the report as required by Chapter 407, Florida Statutes, and that my name appears on the Florida Statutes chaptered company information with an address.

SIGNATURE:

R.O. Priest
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-3-95 407
272 3636