

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER H. HILLIARD
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **J36814** (8)

1. Corporation Name

FIRST TURN LOUNGE, INC.

5 MAY -1 AM 7:43

DEPT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1540 S. NOVA ROAD
DAYTONA BEACH FL 32114**

Mailing Address

**1540 S. NOVA ROAD
DAYTONA BEACH FL 32114**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/08/1986	3a. Date of Last Report 05/20/1994
4. FEI Number 59-2725361	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 adopted, for filing with the Secretary of State, the Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State: FL	26. State: FL
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent

**HILLIARD, RICK
410 SHADY PLACE-
S. DAYTONA FL 32119**

10. Name and Address of New Registered Agent

81. Name HILLIARD, RICHARD W
82. Street Address (P.O. Box Number is Not Acceptable) 2124 VILLA WAY
83. City & State
84. City NEW SMYRNA BEACH
85. Zip Code FL 32169

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 607.0502, Florida Statutes.

SIGNATURE **Denise Hilliard Sec. Denise Hilliard 3-24-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME PD HILLIARD, RICHARD W.	12.2 STREET ADDRESS 410 SHADY PLACE S. DAYTONA FL	13.1 TITLE PD	☒ Change ☐ Addition
12.3 NAME S HILLIARD, DENISE	12.4 STREET ADDRESS 410 SHADY PLACE S. DAYTONA FL	13.2 NAME Hilliard, Richard W.	
12.5 NAME	12.6 STREET ADDRESS	13.3 STREET ADDRESS 2124 Villa Way	
12.7 NAME	12.8 STREET ADDRESS	13.4 CITY & STATE New Smyrna Bch., FL 32169	☐ Change ☐ Addition
12.9 NAME	12.10 STREET ADDRESS	13.5 NAME Hilliard, Denise	
12.11 NAME	12.12 STREET ADDRESS	13.6 STREET ADDRESS 2124 Villa Way	
12.13 NAME	12.14 STREET ADDRESS	13.7 CITY & STATE New Smyrna Bch., FL 32169	☐ Change ☐ Addition
12.15 NAME	12.16 STREET ADDRESS	13.8 TITLE	
12.17 NAME	12.18 STREET ADDRESS	13.9 NAME	
12.19 NAME	12.20 STREET ADDRESS	13.10 STREET ADDRESS	
12.21 NAME	12.22 STREET ADDRESS	13.11 CITY & STATE	☐ Change ☐ Addition
12.23 NAME	12.24 STREET ADDRESS	13.12 TITLE	
12.25 NAME	12.26 STREET ADDRESS	13.13 NAME	
12.27 NAME	12.28 STREET ADDRESS	13.14 STREET ADDRESS	
12.29 NAME	12.30 STREET ADDRESS	13.15 CITY & STATE	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.02(6)(b), Florida Statutes. I further certify that the information included 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 of this report, or on an attached form with an address.

SIGNATURE: **DENISE HILLIARD, SECRETARY** *Denise Hilliard 3-24-95 904 253-5004*