

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J44053

(3)

1. Corporation Name

PACKARD INCORPORATED



Principal Place of Business

2400 N WASHINGTON BLVD
SARASOTA FL 34234
US

Mailing Address

C/O WILLIAM G LAMBRECHT
1550 RINGLING BLVD
SARASOTA FL 34236-6749
US

2. Principal Place of Business

2a. Mailing Address

21 1685 W. University Pkwy
State, Apt. #, etc.

26 2400 N. Washington Blvd.

State, Apt. #, etc.

22 City & State

27 City & State

23 SARASOTA, FL

28 Sarasota, FL

24 34234

Country

25 USA

29 34234

30 USA

9. Name and Address of Current Registered Agent

LAMBRECHT, WILLIAM G.
1550 RINGLING BLVD
SARASOTA FL 34236

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

200 South Orange Ave.

83

84 City

Sarasota

FL

85 Zip Code
34236

3. Date Incorporated or Qualified
11/24/1986

3a. Date of Last Report
04/24/1995

4. FET Number
59-2748665

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

10. Name and Address of New Registered Agent

SIGNATURE

Signature of Corporation Officer or Director

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
POT	FINKL, ANTHONY W.	445 E. ROYAL FLAMINGO	SARASOTA FL	☐
SD	CARTER, JOAN	6473 KAHANA WAY	SARASOTA FL	☐
D	DONALDSON, ANNE	508 BURNING TREE LANE	ARLINGTON HGTS IL	☐
D	MILLER VIRGINIA	3859 CALLIANDRA DR.	SARASOTA FL	☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change	☐ Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption state 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 authorized 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: *X. G. W. Finkl.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-96

Exhibit 10-1

CR2E034 (12/95)