

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

1995 MAY -1 PM 1:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # JS0771

1. Corporation Name

STANLEY & LIVINGSTON OUTFITTERS INC

Principal Place of Business

2340 PERIWINKLE WAY
SANIBEL FL 33957

Mailing Address

SAME

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 1/10/87 3a. Date of Last Report 5/15/94

2. Principal Place of Business

21 Sute, Apt #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Sute, Apt #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number 65-0052386

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

EVELYN R. OWENS
792 LIMPET DR
SANIBEL FL 33957

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 and title if applicable

NOTE: Registered Agent signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME KEITH R. OWENS
STREET ADDRESS 1825 ANDJLEN WAY
CITY ST ZIP SANIBEL FL 33957

TITLE VICE PRESIDENT
NAME EVELYN R. OWENS
STREET ADDRESS 792 LIMPET DR
CITY ST ZIP SANIBEL FL 33957

TITLE SEC
NAME ROBERT OWENS
STREET ADDRESS 792 LIMPET DR
CITY ST ZIP SANIBEL FL 33957

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

21 TITLE Change Addition
22 NAME 500001475375
23 STREET ADDRESS -05/04/95--01028--004
24 CITY ST ZIP *****200.00 *****200.00

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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 110.07(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:

Keith R. Owens PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR
KEITH R. OWENS

4/25/95

813 472-0405

(Use

Customer Feature 2