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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

J56915

(8)

DOCUMENT # 1. Corporation Name ROTOCON, INC.

moreoun, mo	
Principal Place of Business	Mailing Address
410 W. WASHINGTON ST.— CHATTACHOOCHEE FL 32324	410 W. Washington ST. Chattachoochee FL 32324

					3. Date Incorporated or Qualified	3a. Date of Last	Report
					02/10/1987	01/19/1	995
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
21 213 E	LM STREET	26 P.O. Box	446		59-2779083		Not Applicable
Suite, Apt #	r, et c.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	75 Additional e Required
City & State		City & State	······	سر	6. Election Campaign Financing	\$5	00 May Be
23 CHATT	AKOOCHEE, FLORI	OA 28 CHATTAHOO	CHEE	FLORIDA	Trust Fund Contribution		ded to Fees
Zφ	Country	Zip _	Countr	у	8. This corporation has liability for	r intangible tax under	s 199.032,
24 3Q3 <i>Q</i>	14 [25] GADSDEN	29 30324	30 GAD	SDEN	Florida Statutes	s □No	
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New	Registered Agent	
			8.	Name			
HOLLOW	/AY, CHARLES HOWARD		82	Street Address	ss (P.O. Box Number is Not Accepta	ible)	
213 ELM			"	Street Addres	33 / 10. 20x (10.1120) 15 (10.11000) 15	10.10)	
	HOOCHEE FL 32324		83				
21.0.1.1.							
			84	City		FI 85	Zip Code
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above	named corporat	tion submits this statement for the po of directors. I hereby accept the ap-	urpose of changing its	s registered offic
SIGNATURE	n, and accept the obligations of, Se			nt signature required v		DATE	
12.		ND DIRECTORS	13.	rii signatore redoned v	ADDITIONS/CHANGES TO OF		TODE IN 12
THLE	PSTD	DELETE	1, 1 TITLE		ADDITIONS/CHANGES TO OF	Chang	
NAME		_				LJ Onang	e [] Addition
	HOLLOWAY, CHARLES HO 213 ELM STR	WARD	1.2 NAME				
STREET ATICGESS				T ADDRESS			
COTY - ST - ZIP	CHATTAHOOCHEE FL	[] DELETE	1.4 CITY-			Chana	. El Addison
TIFLE	VPS	Dettit	2 1 TITLE			Chang	e [] Addition
NAM(HOLLOWAY, ELAINE C.		2 2 NAME				
STREET ADORESS	213 ELM DR.			T ADDRESS			
CITY-ST-ZIP	CHATTAHOOCHEEE FL	[] DELETE	2 4 CITY -				
			3 1 THTLE			☐ Chang	e 🔲 Addition
NAME			3 2 NAME	j			
STREET ADDRESS				T ADORESS			
CITY - S1 - ZIP			3 4 CITY -				—
10:01		☐ DELETE	4. 1 TITLE			Change	e 🔲 Addition
NAME			4.2 NAME				
STREE ADDRESS			4.3 STREE	I ADDRESS			
CITY ST-ZIP			4.4 CITY -	ST-ZIP		danid 4 d'	
Tillf		☐ DELETE	5 1 TITLE			☐ Changi	e 🚹 Addition
NAME			5.2 NAME				
STREET ADDRESS			53STREE	1 ADDRESS			
CIY St 7P			5 4 CITY -	ST-ZIP			
TIFLE		DELETE	6 1 TITLE			☐ Chang	e 🔲 Addition
NIME			6.2 NAME				
STREET ADDRESS			6 3 STREE	T ADDRESS			
CHY+ST-ZIP			6 4 CITY-	ST-ZIP			
	the state of the s	durity this files is valuntarily furni			the exemption stated in Section 119	07/2\(II) Florido Ctol	· · · · · · · · · · · · · · · · · · ·

certly 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 truete empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or bringed, or on any attachment with an address.

SIGNATURE: