

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J99198 (0)

1. Corporation Name

RUNNELLS MANUFACTURING, INC.



Principal Place of Business

Mailing Address

6934 VICKIE CIRCLE
WEST MELBOURNE FL 32904

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WEST MELBOURNE FL 32904

3. Date Incorporated or Qualified
10/23/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2853327

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

10. Name and Address of New Registered Agent

MITCHELL, BRUCE A.
1826 S. RIVERVIEW DR.
MELBOURNE FL 32901

81 Name

Rebecca Runnells

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

1215 Ambra Drive

83

84 City

Melbourne

FL

85 Zip Code

32940

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

Rebecca Runnells

Rebecca Runnells

Secretary

6-19-96

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME RUNNELLS, ROBERT M.
STREET ADDRESS 1215 AMBRA DR
CITY-ST-ZIP MELBOURNE FL ☐ DELETE

1.1 TITLE
1.2 NAME ☐ Change ☐ Addition
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE T
NAME HORSCHEL, KATHY
STREET ADDRESS 360 EAST DRIVE
CITY-ST-ZIP MELBOURNE FL ☒ DELETE

2.1 TITLE
2.2 NAME ☐ Change ☐ Addition
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE EVP
NAME SCHELL, MAX E.
STREET ADDRESS 2650 LARRY COURT
CITY-ST-ZIP MELBOURNE FL ☐ DELETE

3.1 TITLE
3.2 NAME ☐ Change ☐ Addition
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VP
NAME RUNNELLS, REBECCA J
STREET ADDRESS 1215 AMBRA DR.
CITY-ST-ZIP MELBOURNE FL ☐ DELETE

4.1 TITLE
4.2 NAME Secretary/Treasurer ☒ Change ☐ Addition
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VP
NAME MORSE, JR. R W.
STREET ADDRESS 885 NORDEN ST., N.W.
CITY-ST-ZIP PALM BAY FL ☐ DELETE

5.1 TITLE
5.2 NAME ☐ Change ☐ Addition
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME ☐ Change ☐ Addition
6.3 STREET ADDRESS
6.4 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 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 empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Rebecca Runnells

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-19-96 (407) 728-9366

Date

Display Phone #

CR2E034 (3/96)