

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K11698

(3)

1. Corporation Name

RICK L. OLSON INC.

Principal Place of Business

% MICHAEL S. EDENFIELD
206 MASON STREET
BRANDON FL 33511

Mailing Address

% MICHAEL S. EDENFIELD
206 MASON STREET
BRANDON FL 33511



2. Principal Place of Business

21 2315 TRAVIS AVE

2a. Mailing Address

26 2315 TRAVIS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 VALRICO FL

24 Zip

25 33594

Country

25 US

27 City & State

28 VALRICO FL

29 Zip

30 33594

Country

30 US

9. Name and Address of Current Registered Agent

EDENFIELD, MICHAEL S.
206 MASON STREET
BRANDON FL 33511

3. Date Incorporated or Qualified

01/08/1988

3a. Date of Last Report

04/12/1995

4. FEI Number

59-2876300

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

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 607.1505, 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 if not applicable, date

(If not applicable, registered agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME OLSON, RICK L.
STREET ADDRESS 2315 TRAVIS AVENUE
CITY-ST-ZIP VALRICO FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

Change Addition

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

Change Addition

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

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

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

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick L. Olson 4-10-96 (813) 689-7800

CR2E034 (12/95)