

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 11 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K23653** (4)
1. Corporation Name
THE ROBBIE COMPANY

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
8216 HAMPSHIRE DR SEBRING FL 33870 **8216 HAMPSHIRE DR SEBRING FL 33870**

3. Date Incorporated or Qualified **05/16/1988** 3a. Date of Last Report **03/08/1994**

2. Principal Place of business 2a. Mailing Address
21 **6600 106TH ST. N.** 26 **6600 106TH ST. N.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **#9** 27 **#9**
City & State City & State
23 **SEMINOLE, FL. 34642** 28 **SEMINOLE, FL. 34642**
Zip Country Zip Country
24 **34642** 25 **PINELLAS** 29 **34642** 30 **PINELLAS**

4. FEI Number **65-0061334** 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
ROBERTSON, JAMES, MARTIN
8216 HAMPSHIRE DR
SEBRING FL 33870

10. Name and Address of New Registered Agent
81 Name **ROBERTSON, JAMES MARTIN**
82 Street Address (P.O. Box Number is Not Acceptable) **17960 GULF BLVD.**
83 **#109**
84 City **REDINGTON SHRS.** 85 Zip Code **FL 33708**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute, 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 Statute.
SIGNATURE *James Martin Robertson* **JAMES MARTIN ROBERTSON, PRES.** DATE **4/7/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPV	ROBERTSON, JAMES, M	1.1 TITLE DPV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	8216 HAMPSHIRE DR	1.2 NAME	ROBERTSON, JAMES M.
STREET ADDRESS	SEBRING FL	1.3 STREET ADDRESS	17960 GULF BLVD. #109
CITY - ST - ZIP		1.4 CITY - ST - ZIP	REDINGTON SHRS., FL. 33708
TITLE DST	BUONCOMPAGNO, LORENE	2.1 TITLE DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	8216 HAMPSHIRE DR	2.2 NAME	ROBERTSON, LORENE
STREET ADDRESS	SEBRING FL	2.3 STREET ADDRESS	17960 GULF BLVD. #109
CITY - ST - ZIP		2.4 CITY - ST - ZIP	REDINGTON SHRS., FL. 33708
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(3)(k), Florida Statute. 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 Statute; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lorene Robertson* **LORENE ROBERTSON** DATE **4/7/95** (813) 397-2522