

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K 29186

1. Corporation Name

SABO, INC.

600001504616

-06/02/95--01037--011

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
7-21-88

3a. Date of Last Report
4-27-94

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2906448

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

GERALD ROBERT CARTER
2633 Holly Point East
Orange Park, FL 32073

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 (Type or printed name of registered agent and file # 4490.000)

(Type) Registered Agent signature (required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P, VP, S, T, D.
NAME CARTER, GERALD ROBERT
STREET ADDRESS 2633 Holly Point East
CITY, ST, ZIP Orange Park, FL 32073

1.1 TITLE VP, S, T
1.2 NAME Gerald R. Carter
1.3 STREET ADDRESS 2633 Holly Point E.
1.4 CITY, ST, ZIP Orange Park, FL 32073
☒ Change ☐ Addition

TITLE Asst. Secretary
NAME Mary E. Carter
STREET ADDRESS P.O. Box 91 N/A
CITY, ST, ZIP Melrose, FL 32666

2.1 TITLE Asst. Secretary
2.2 NAME Mary E. Carter
2.3 STREET ADDRESS P.O. Box 91 N/A
2.4 CITY, ST, ZIP Melrose, FL 32666
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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 110.07(3)(b), 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:

Gerald Robert Carter
Signature (Type or printed name of registered agent or director)

GERALD ROBERT CARTER

RECORDED BY MAY 1

CH

4-24-95

904/269-7592