SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE SON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

Y.

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K37951

(6)

FEDERAL WAREHOUSE CORPORATION #3

APPROVED AND FILED

97 JUL 25 AM 10: 09



Principal Place of Business Mailing Address		- T LEBERBAIA OOD TAKKI KERING TOLGA BAHAN KAQL BIRTIK BUHAN DUBAY BIRBIA BAHAH BAKKIY ADDA				
% STANLEY A. RIGGS. JR. P.O. BOX 3749 SARASOTA FL 34230	% Stanley A. Riggs, Jr. P.O. Box 3749 Sarasota Fl. 34230		DO NOT WRITE IN THIS SPACE			
US	US		3. Date Incorporated or Qualified 10/10/1988	3a. Date of Last Report 01/30/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		02-0424506	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25	Zip Ci	ountry	This corporation owes or has pai Personal Property Tax due June			
Name and Address of Curre	nt Registered Agent	10. Name and Address of New Registered Agent				
RIGGS, STANLEY A. JR.		81 Name				
5400 OCEAN BLVD - UNIT 75 SARASOTA FL 34242		82 Street Addre	Address (P.O. Bord Imperiator (P.O. Bord Imp			
		83	****165.00 ****165.00			
		84 City	··	FL 85 Zip Code		
 Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig 	e of Florida. Such change was authoriz	ed by the corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered		
SIGNATURE						

-	m familiar with, and accept the obligations of, Section 60	7.0505, Florid	a Statutes.	Solution of the solution of th	about the appearance of	· · · · · · · · · · · · · · · · · · ·
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re	gistered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	S IN 12
TITLE	PO 🔲 :	DELETÉ	1.1 TITLE		Change	Addition
NAME	RIGGS, STANLEY A. JR.		1.2 NAME	•		
STREET ADDRESS	5400 OCEAN BLVD UNIT 75		1.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE	_	☐ Change	Addition
NAME			5.2 NAME	1001/29		
STREET ADDRESS			5.3 STREET ADDRESS	2015		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	N		
TITLE		DELETE	6.1 TITLE	Ψ'	☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

64 CITY-S1-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this annual report or supplies with the information indicated on the 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.