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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K56551** (0)

1. Corporation Name

GENERAL CANVAS OF FLORIDA, INC.



Principal Place of Business

Mailing Address

**8466 SE BAYBERRY TERRACE
232 JUPITER STREET
HOBE SOUND FL 33455
US**

**8466 SE BAYBERRY TERRACE
232 JUPITER STREET
HOBE SOUND FL 33455
US**

3. Date Incorporated or Qualified
01/03/1989

3a. Date of Last Report
04/13/1995

2. Principal Place of Business

2a. Mailing Address

21 **8466 SE Bayberry Terrace**

26 **8466 SE Bayberry Terrace**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Hobe Sound, Florida**

28 **Hobe Sound, Florida**

24 Zip

Country

29 Zip

Country

33455

USA

33455

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MONTEFUSCO, ROBERT B.
8466 SE BAYBERRY TERRACE
HOBE SOUND FL 33455**

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

Robert B. Montefusco

Robert B. Montefusco - President

2/5/96

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 **PD** ☐ DELETE

NAME **MONTEFUSCO, ROBERT B.**
STREET ADDRESS **8466 SE BAYBERRY TERRACE**
CITY-ST-ZIP **HOBE SOUND FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

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

SIGNATURE

Robert B. Montefusco

Robert B. Montefusco - President

2/5/96

(407)

Signature typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (12/95)