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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K97645**

(1)

1. Corporation Name

LAVALLEY OF FLORIDA, INC.



Principal Place of Business

**5800 MONROE ST
P O BOX 8726
TOLEDO OH 43623**

Mailing Address

**5800 MONROE ST
P O BOX 8726
TOLEDO OH 43623**

2. Principal Place of Business

2a. Mailing Address

21 State Apt #, etc

26 State Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

**KUNMANN, EDMUND J
465 E PALMETTO PK RD
BOCA RATON FL 33432**

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 607.1506, 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 607.0504, Florida Statutes.

SIGNATURE

Signature of the person who is changing the registered office or registered agent, or both, in the State of Florida.

Signature of the person who is changing the registered office or registered agent, or both, in the State of Florida.

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	LAVALLEY, RICHARD G SR.	
STREET ADDRESS	2600 S. OCEAN BLVD, #6A	
CITY-STATE-ZIP	BOCA RATON FL	
TITLE	S	☐ DELETE
NAME	LAVALLEY, RICHARD G. JR	
STREET ADDRESS	5800 MONROE ST BLDG F	
CITY-STATE-ZIP	SYLVANIA OH	
TITLE	T	☐ DELETE
NAME	LAVALLEY, DANIEL	
STREET ADDRESS	5800 MONROE ST BLDG F	
CITY-STATE-ZIP	SYLVANIA OH	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard G. LaValley, Jr.

3-11-96 (419) 882-0081
LaValley & Todek Co., L.P.A.
24-1665276 5800 Monroe St. Toledo, OH 43623

CR2E034 (12/95)