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 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K98234** **(3)**

1. Corporation Name
LAVERACK & SON, INC.

Principal Place of Business
C/O WARREN E. LAVERACK
5030 SHELLEY COURT
ORLANDO FL 32807

Mailing Address
C/O WARREN E. LAVERACK
5030 SHELLEY COURT
ORLANDO FL 32807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/26/1989
3a. Date of Last Report: 02/11/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 25 / 29 / 30

4. FEI Number: 59-2968081 — 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. The corporation has taken or will take action to be qualified for certain tax benefits under Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LAVERACK, WARREN E.
5030 SHELLEY COURT
ORLANDO FL 32807

10. Name and Address of New Registered Agent

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 Section 607.0505, 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 of the registered agent or an officer of the registered agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 94	
01 Title	DP	41 Title	☐ Change ☐ Addition
02 Name	LAVERACK, WARREN E.	42 Name	
03 Street Address	5030 SHELLEY CT.	43 Street Address	
04 City, St, Zip	ORLANDO FL	44 City, St, Zip	
05 Title	DST	51 Title	☐ Change ☐ Addition
06 Name	LAVERACK, MYRL W.	52 Name	
07 Street Address	5030 SHELLY CT	53 Street Address	
08 City, St, Zip	ORLANDO FL	54 City, St, Zip	
09 Title	DV	61 Title	☐ Change ☐ Addition
10 Name	LAVERACK, GREGORY E.	62 Name	
11 Street Address	5168 BARCELONA ST.	63 Street Address	
12 City, St, Zip	ORLANDO FL	64 City, St, Zip	
13 Title		71 Title	☐ Change ☐ Addition
14 Name		72 Name	
15 Street Address		73 Street Address	
16 City, St, Zip		74 City, St, Zip	
17 Title		81 Title	☐ Change ☐ Addition
18 Name		82 Name	
19 Street Address		83 Street Address	
20 City, St, Zip		84 City, St, Zip	
21 Title		91 Title	☐ Change ☐ Addition
22 Name		92 Name	
23 Street Address		93 Street Address	
24 City, St, Zip		94 City, St, Zip	

14. I hereby certify that the information supplied with this report, voluntarily furnished and checked (only for the purposes stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on the annual report or supplemental annual report is true and in order and that my signature shall have the same legal effect and force as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or is added by amendment in accordance with an affidavit.

SIGNATURE: W. E. Laverack President 4/29/95 273 3818
SIGNATURE AND TYPED OR PRINTED NAME OF VALID OFFICER OR DIRECTOR — Date — Daytime Phone

0417072 FP