SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1 06288

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2.11	PRINKLER SPECIALISTS, II	NC.		i Harindii Ain Daidh dinka Hari Hari Harik	
Principal Place	of Business	Maring Address			
% JUDITH P. VOISELLE % JUDITH P. VOISELLE 7703 LAIRD STREET 7703 LAIRD STREET					
PANAMA CITY	Y FL 32408	PANAMA CITY FL 32408		3. Date Incorporated or Qualified	3a. Date of Last Report
			~~ ~~ ·	07/27/1989	06/15/1995
2. Principal Pla		2a. Mailing Address	0	4. FEI Number	Applied For
1 7136 1	Hwy, 11	26 P.O. Box 89	7	65-0139582	Not Applicable
Suite, Apt #	, etc •	Suite, Apt. #. etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3 South		28 Lynn Haven	EL	Trust Fund Contribution	Added to Fees
Zib	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199 032.
1 32409	7 25 USA	29 32444	USA		Yes No
<u> </u>	9. Name and Address of Currer			10. Name and Address of New Re	gistered Agent
VO:	JOSELIE WINTEN D		81 Name	Edward Carter	
	ISELLE, JUDITH P.		82 Street A	Address (P.O. Box Number is Not Acceptate	nle)
	D3 LAIRD STREET		102	7136 Hwy 77	
PAI	NAMA CITY FL 32408		83		
				<u> </u>	
			84 City	Southport	FL 85 Zip Code 32409
11. Pursuant to	o the provisions of Sections 607.050	02 and 607.1508. Florida Statutes	. The above-named c	corporation Submits this Statement for the o	urgose of changing its registered
office or re	edistered agent, or both, in the State	e of Florida. Such change was aut	thorized by the corpo	oration's board of directors. Thereby accep	t the appointment as registered
agent I an	n familiar with, and accept the oblig	jations of, Section 607.0505, Flori	da Statutes		-1-1-1
OLONIATION	I have the T. C.	arter Edward		. / . /	7/2//6/
SIGNATURE 🍦			- 1. Corr	<u> </u>	7/31/96
5	Signature, typed or printed name of registered agr	ont and title if applicable (NOTE	Hillipidiered Agent signature	Le densité au serraité démandé	- 1001
12.	OFFICERS AN	ont and ette it applicable (NOTE ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
12. TOLE	OFFICERS AN	ont and title if applicable (NOTE	13. 11TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
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made under cath, that I am an officer or director of the corporation of the receiver of trustee emporthat my name appears in Block 12 or Block 13 if changed, or on an attachment with an address SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TO COMPANY TO COMPANY