

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 6, 1998.
AMOUNT DUE ON OR BEFORE 8/6/98: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL -3 AM 8:07

DOCUMENT # **L22277**

(2)

1. Corporation Name

BRITTANICA LTD. INC.

Principal Place of Business

**16 BRENDA CAROL CRISP CAMPER
2982 ASHCROFT COURT
CLEARWATER FL 34621**

Mailing Address

**277 PLANTATION HILL RD
2982 ASHCROFT COURT
GULF BREEZE FL 32561
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/11/1989

3a. Date of Last Report

07/21/1994

4. FET Number

65-0167435

Applied For

Not Applicable

5. Certificate of Status Desired

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**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

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**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

23

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CAMPER, BRENDA CAROL CRISP
2982 ASHCROFT COURT
CLEARWATER FL 34621**

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

Signature (typed or printed name of registered agent and the corporation)

20/11. Registered Agent signature required when renewing

(2/11)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

D

**CAMPER, BRENDA CAROL C.
2982 ASHCROFT COURT
CLEARWATER FL**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

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CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

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Change

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Add On

1. TITLE

1. NAME

1. STREET ADDRESS

1. CITY ST ZIP

2. TITLE

2. NAME

2. STREET ADDRESS

2. CITY ST ZIP

3. TITLE

3. NAME

3. STREET ADDRESS

3. CITY ST ZIP

4. TITLE

4. NAME

4. STREET ADDRESS

4. CITY ST ZIP

5. TITLE

5. NAME

5. STREET ADDRESS

5. CITY ST ZIP

6. TITLE

6. NAME

6. STREET ADDRESS

6. CITY ST ZIP

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Change

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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)(b), Florida Statutes. I further certify that the information presented 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:

Brenda C. Camper
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

6-27-95

Date

(Signature of State)