

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 11:28

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # L36225

(5)

1. Corporation Name

INTERTECT DESIGN GROUP, INC.

Principal Place of Business

**1040 WOODCOCK RD.
STE. 251
ORLANDO FL 32803
US**

Mailing Address

**1040 WOODCOCK RD
#251
ORLANDO FL 32803
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/01/1990

3a. Date of Last Report

06/21/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

27. City & State

27

Zip

Country

24

Zip

Country

29

Zip

Country

4. FEI Number

59-2983284

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. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~POPKIN, RONALD ALLEN
6444 SANDBERRY BLVD
ORLANDO FL 32840~~

10. Name and Address of New Registered Agent

81. Name

Popkin, Eric A.

82. Street Address (P.O. Box Number is Not Acceptable)

3845 Beckontree Pl.

83.

84. City

Oviedo

FL

85. Zip Code
32765

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 607.0503, Florida Statutes.

SIGNATURE

Eric A. Popkin, Vice President

4/21/95

Signature typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

~~DV
POPKIN, RONALD ALLEN
6444 SANDBERRY BLVD
ORLANDO FL~~

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DVS
POPKIN, ERIC ALLEN
3850 HEATHER AVE
DELTONA FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DP
HOLLON, LARRY PATRICK
9124 PALOS VERDE DR.
ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

HOLLON, LARRY PATRICK
9124 PALOS VERDE DR.
ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DV
JOHNSON, MARK P
2458 MARKINGHAM RD.
MAITLAND FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☒ Change ☐ Addition

**3845 Beckontree Pl.
Oviedo, FL. 32765**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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:

Larry P. Hollon

Larry P. Hollon, President

4/21/95

407/897-3500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number