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 APR 11 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L37292** **(4)**

1. Corporation Name
LLOYDS HOLDINGS, INC.

Principal Place of Business	Mailing Address
C/O EDWARDS, CURTIS & WARD P.A. 3055 CARDINAL DR STE 202 VERO BEACH FL 32963	C/O EDWARDS, CURTIS & WARD P.A. 3055 CARDINAL DR STE 202 VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **12/13/1989**
3a. Date of Last Report: **07/11/1994**

2. Principal Place of Business
21:
Suite, Apt. #, etc.
22:
City & State
23:
Zip 24: Country 25:

2a. Mailing Address
26:
Suite, Apt. #, etc.
27:
City & State
28:
Zip 29: Country 30:

4. FEI Number: **59-2984327** ☐ 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

CURTIS, NED P.
C/O EDWARDS, CURTIS & WARD P.A.
3055 CARDINAL DR STE 202
VERO BEACH FL 32963

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 1 TITLE	☐ Change ☐ Addition
NAME	LLOYD, RICHARD, SR.	1 2 NAME	
STREET ADDRESS	923 ALANBURY COURT	1 3 STREET ADDRESS	
CITY-ST-ZIP	PICKERING,ONT,CANADA	1 4 CITY-ST-ZIP	
TITLE	STD	2 1 TITLE	☐ Change ☐ Addition
NAME	LLOYD, EVELYN	2 2 NAME	
STREET ADDRESS	923 ALANBURY COURT	2 3 STREET ADDRESS	
CITY-ST-ZIP	PICKERING,ONT,CANADA	2 4 CITY-ST-ZIP	
TITLE	VD	3 1 TITLE	☐ Change ☐ Addition
NAME	LLOYD, PAUL	3 2 NAME	
STREET ADDRESS	60 HUMPHREY	3 3 STREET ADDRESS	
CITY-ST-ZIP	AJAX ONT,CANADA	3 4 CITY-ST-ZIP	
TITLE	D	4 1 TITLE	☐ Change ☐ Addition
NAME	LLOYD, RICHARD JR	4 2 NAME	
STREET ADDRESS	930 FINLEY AVENUE	4 3 STREET ADDRESS	
CITY-ST-ZIP	AJAX, ONT. CANADA L1S 3V2	4 4 CITY-ST-ZIP	
TITLE	D	5 1 TITLE	☐ Change ☐ Addition
NAME	TYRRELL, LOUISE	5 2 NAME	
STREET ADDRESS	71 CHALMERS	5 3 STREET ADDRESS	
CITY-ST-ZIP	AJAX. ONT. CANADA L15 526	5 4 CITY-ST-ZIP	
TITLE	D	6 1 TITLE	☐ Change ☐ Addition
NAME	COTTER, KIMBERLY	6 2 NAME	
STREET ADDRESS	32 FOTHERGILL COURT	6 3 STREET ADDRESS	
CITY-ST-ZIP	WHITBY, ONT, CANADA L1P 1L4	6 4 CITY-ST-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)(i), 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: Evelyn Lloyd EVELYN LLOYD April 1/95 (905)831-8128
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

007/1991 CP