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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

L69439 **DOCUMENT #**

(2)

STOLLE DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address			I MANIET AND	
4910 48TH PLACE 4815 47TH COURT	4910 48TH PLACE 4815 47TH COURT			_
VERO BEACH FL 32967 US	VERO BEACH FL 32967 US		3. Date Incorporated or Qualified 05/01/1990	3a. Date of Last Report 05/01/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1 4910 48th Place		ace	65-0196642	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 3 Vero Beach FL	City & State 28 Vero Beach		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3 Vero Deach FL. Zip Country 4 32967 25 US	Zip Co	untry US	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s 199.032, ☐ No
9, Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	egistered Agent
<u>. , ,</u>		81 Name		
HETT, JOHN 4820 48TH PLACE	82 Street		et Address (P.O. Box Number is Not Acceptable)	
VERO BEACH FL 32967		83		
		84 City		FL 85 Zip Code
				full and the second off or

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. 4/26/96 SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1. 1 TITLE HETT, JOHN M. 1.2 NAME NAME **4820 48TH PLACE** 1.3 STREET ADDRESS STREET ADDRESS <u>32961</u> VERO BEACH FL 1.4 CITY-ST(ZIP) CITY - ST- ZIP ☐ Change Addition DELETE TDS 2 1 TITLE TITLE STOLLE, JOHN F. 2.2 NAME NAME 600 BEACH ROAD 2 3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 2.4 CITY-ST ZIP CITY - ST - ZIP Change ☐ Addition DELETE 3. 1 TITLE TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-S1-ZIP ☐ Addition ☐ Change DELETE 4. 1 TITLE THLE 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5 1 TITLE 52 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 6. 1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 early; 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.

OFFICER OR DIRECTOR

CR2E034 (12/95)