

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L77107

(5)

1. Corporation Name

CHARLES B. GWYNN & CO., INC.



Principal Place of Business

C/O CHARLES B. GWYNN
161 NE 5TH AVE.
DELRAY BEACH FL 33483

Mailing Address

C/O CHARLES B. GWYNN
161 NE 5TH AVE.
DELRAY BEACH FL 33483

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GWYNN, CHARLES B.
161 NE 5TH AVE.
DELRAY BEACH FL 33483

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 607.08(2) and 607.15(8), 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, the undersigned, am a director of the corporation, am familiar with, and accept the obligations of, Section 607.08(8), Florida Statutes.

SIGNATURE

Signature by the person or persons who are authorized to change the registered office or registered agent, or both, in the State of Florida.

Signature by the person or persons who are authorized to change the registered office or registered agent, or both, in the State of Florida.

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP
GWYNN, CHARLES B.
615 LAKE DR.
DELRAY BEACH FL

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

VS
GWYNN, CHARLES B.
615 LAKE DR.
DELRAY BEACH FL

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

1. NAME

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

D

Gwynn, Carole S.
615 Lake Drive
Delray Beach, FL

☐ Change

☒ Addition

D

Gwynn, Charles J.
615 Lake Drive
Delray Beach, FL

☐ Change

☒ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles B. Gwynn
Charles B. Gwynn

3-15-96(407) 278-3378

CR2E034 (12/95)