

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L81111** (1)

1. Corporation Name

ROBINSON LOOP, INC.



Principal Place of Business

Mailing Address

C/O MICHAEL R. CALHOON
P.O. BOX 439
PARRISH FL 34219

C/O MICHAEL R. CALHOON
P.O. BOX 439
PARRISH FL 34219

2. Principal Place of Business

2a. Mailing Address

21 C/O WILLIAM C. ROBINSON
Suite, Apt. #, etc.

26 P.O. Box 439
Suite, Apt. #, etc.

22 City & State

27 City & State

23 PARRISH, FL

28 PARRISH, FL

24 Zip 34219 Country USA

29 Zip 34219 Country USA

9. Name and Address of Current Registered Agent

ROBINSON, WILLIAM C.
I-75 AND MOCCASIN WALLOW RD.
PARRISH FL 34219

3. Date Incorporated or Qualified

06/18/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0207765

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

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 607.1505, 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 607.0502, Florida Statutes.

SIGNATURE

William C. Robinson

(Print) Registered Agent Signature (must be on stamp)

DATE

12. OFFICERS AND DIRECTORS

11	NAME	STREET ADDRESS	CITY-ST-ZIP	10	NAME	STREET ADDRESS	CITY-ST-ZIP
☐ DELETE	DPT			☐ DELETE			
	ROBINSON, WILLIAM C.	6620 RIVERVIEW BLD.	BRADENTON FL				
☐ DELETE	S			☐ DELETE			
	STEIN, SHARON	2150 73ND ST. CIRCLE W	BRADENTON FL				
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11	NAME	STREET ADDRESS	CITY-ST-ZIP	10	NAME	STREET ADDRESS	CITY-ST-ZIP
☐ Change ☐ Addition				☐ Change ☐ Addition			
☐ Change ☐ Addition				☐ Change ☐ Addition			
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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)(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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

William C. Robinson

(Signature and Typed or Printed Name of Signing Officer or Director)

Date

Daytime Phone #

CR2E034 (12/95)