

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 26 AM 10:39

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # L84688 (5)

1. Corporation Name

O.I.F. CORPORATION, INC.

Principal Place of Business

**%GRAY KRADLE
1214 PASADENA AVE SOUTH
SOUTH PASADENA FL 33707**

Mailing Address

**%GRAY KRADLE
1214 PASADENA AVE SOUTH
SOUTH PASADENA FL 33707**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/29/1990

3a. Date of Last Report

04/13/1994

4. FEI Number

59-3017168

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. 199.052,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

115 First St. East

27

Suite, Apt. #, etc.

28

108

29

Tierra Verde Fl.

30

33715

31

Pinellas

9. Name and Address of Current Registered Agent

**KRADLE, GARY
1214 PASADENA AVE S
S PASADENA FL 33707**

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Gary L. Kradle
Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

Gary L. Kradle ST

DATE

4-18-95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PO
FISHER, JUDITH A
7100 SUNSET WAY #109W
ST PETERSBURG FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**ST
KRADLE, GARY
7100 SUNSET WAY #109W
ST PETERSBURG FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

**PO
Fisher, Judith A.
115 First St. East
Tierra Verde FL**

☒ Change ☐ Addition

33715

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

**ST
Kradle, Gary
115 First St. East
Tierra Verde FL**

☒ Change ☐ Addition

33715

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 110.07(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:

Gary L. Kradle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary L. Kradle ST

Date

4-18-95

My/Our Filing #

813-866-1133