

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candice B. McPherson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L91089 (7)

1. Corporation Name

HOWARD LONG INTERNATIONAL, INC.

FILED
95 MAY -1 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

124 COCONUT ROW
PALM BCH FL 33480-4115
US

Mailing Address

PO BOX 6688 NA
WHEELING WV 26003
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1990

3a. Date of Last Report

08/17/1994

4. FEI Number

65-0228488

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 § 199.002,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

24

County

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

29

County

30

9. Name and Address of Current Registered Agent

ICARD, MERRILL, CULLIS, TIMM ET AL
C/O CHRISTOPHER K CASWELL
2033 MIAN STREET #600
SARASOTA FL 34237

10. Name and Address of New Registered Agent

01

Name

02

Street Address (P.O. Box Number is Not Acceptable)

03

04

City

FL

05

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

Signature (Typed or printed name of registered agent and a true signature)

(631) Registered Agent signature required when necessary

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

LONG, HOWARD W.

STREET ADDRESS

124 COCONUT ROW

CITY - ST - ZIP

PALM BCH 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

11 TITLE

☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 110.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemented 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:

Howard W. Long

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

4/30/95

(631) 232-3777