

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

35 MAY 19 11:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M29978** (7)
1. Corporation Name
441 PARTNERS, INC.

Principal Place of Business: **13688 BRIGHTSTONE ST. WEST PALM BEACH FL 33414**
Mailing Address: **13688 BRIGHTSTONE ST. WEST PALM BEACH FL 33414**

(DO NOT WRITE IN THIS SPACE)

3. Date of expiration of Certificate: **04/14/1986**
3a. Date of Last Request: **04/26/1994**

4. FEI Number: **59-2669632**
Applied For:
Not Applied:

5. Certificate of State Taxed: **\$8.75 Additional Fee Required**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**
Total Fund Contributions:

8. The corporation has liability for intangible tax under the Florida Statutes: Yes No

2. Principal Place of Business: **21**
2a. Mailing Address: **26**
State Apt. # etc.: **22**
27
City & State: **23**
28
County: **24**
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PADEN, LEON R.
13688 BRIGHTSTONE ST.
WEST PALM BEACH FL 33414**

81. Name: _____
82. Street Address (if a box number is not acceptable): _____
83. _____
84. City: _____
85. State: **FL**

11. If a change of registered agent is being made, the above named corporation hereby certifies that it is prepared for the payment of change of registered agent fees and is prepared to pay the same. If the corporation is not prepared to pay the same, the corporation is hereby notified that the appointment as registered agent is null and void.

SIGNATURE

12. NAME: PD FLETCHER, CHRISTINE 126 WEYBRIDGE CIRCLE ROYAL PALM BEACH FL	13. AUTHORITY: _____
NAME: VD MACLEOD, KIM 3737 NORTH FEDERAL HWY DELRAY BEACH FL	AUTHORITY: _____
NAME: SD RUBANO, ELIZABETH 11894 SUELLEN CIRCLE WEST PALM BEACH FL	AUTHORITY: _____
NAME: TD PADEN, LEON R. 13688 BRIGHTSTONE STONE WEST PALM BEACH FL	AUTHORITY: _____
NAME: D SUNDERLAND, RONALD 851 RAMBLING DRIVE CIR. WEST PALM BEACH FL	AUTHORITY: _____

14. The undersigned hereby certifies that the information furnished herein is true and correct, and that the corporation is prepared to pay the same. If the corporation is not prepared to pay the same, the corporation is hereby notified that the appointment as registered agent is null and void.

SIGNATURE: *Leon R. Paden*
SIGNATURE AND TYPE OR PRINT NAME OF OFFICER OR DIRECTOR
LEON R. PADEN

5/14/95 (407) 798-8040