

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

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



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

**FILED**  
**May 01, 1996 08:00 AM**  
**Secretary of State**

**DOCUMENT # M40845**

1. Corporation Name

**R.J. Coddington & Associates**

Principal Place of Business

Mailing Address

**1132 NE 48th Street  
Pompano Beach, FL  
33064**

**1132 NE 48th Street  
Pompano Beach, FL  
33064**

2. Principal Place of Business

21 **same as above**

2a. Mailing Address

26 **same as above**

3. Date Incorporated or Qualified

**March 1986**

3a. Date of Last Report

**1995**

4. FEI Number

**59-2818625**

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

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Ronald J. Coddington  
1132 NE 48th Street  
Pompano Beach, FL 33064**

81 Name

**same**

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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

*RJ Coddington*

(Print Name of Registered Agent Signature Required After Registration)

**5-31-96**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D Pres, S, T  
Coddington, Ronald J.**

STREET ADDRESS **1132 NE 48th Street  
Pompano Beach, FL 33064**

CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VP  
Leland H. Weiler**

STREET ADDRESS **1132 NE 48th Street  
Pompano Beach, FL 33064**

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

**800001858868  
-06/11/96--01175--013  
\*\*\*200.00**

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 Block 12 or Block 13 if changed, on an attachment with an address.

**SIGNATURE:**

*RJ Coddington*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Ronald J. Coddington 5-31-96**

**5-31-96**

(Day)

(Daytime Phone #)

CR2E034 (12/95)