

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

**APPROVED
AND
FILED**

MAY - 1 AM 3:47

**STATE OF FLORIDA
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M54888 (6)
1. Corporation Name
SHAWNEE INVESTMENTS OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **- 610 DAVID B. GOODWIN
200 S. ORANGE AVE. 3000 BARNETT PLAZA
ORLANDO FL 32802 ---**
Mailing Address: **LEVINE, I STANLEY
1110 BRICKELL AVE
MIAMI FL 33131
US**

3. Date Incorporated or Qualified: **07/02/1987** 3a. Date of Last Report: **05/01/1994**

4. FEI Number: **59-2826465** 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 (a)(2) Florida Statutes: ☐ Yes ☒ No

2. Principal Place of Business: **21** 2a. Mailing Address: **26**
State: **22** City & State: **27**
City & State: **23** City & State: **28**
City: **24** Country: **25** City: **29** Country: **30**

9. Name and Address of Current Registered Agent: **LEVINE, I STANLEY
1110 BRICKELL AVE
7 TH FLOOR
MIAMI FL 33131**
10. Name and Address of New Registered Agent: **81 Name
82 Street Address (P.O. Box Number is Not Applicable)
83
84 City FL 85 Zip Code**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE: **3/20/95**

12. OFFICERS AND DIRECTORS: **13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS:**

NAME: DP KIRKWOOD, CHARLES W. ONE WORTHINGTON ST. SHAWNEE-ON DELAWARE, P	1. NAME: ☐ Change ☐ Addition
NAME: D KIRKWOOD, VIRGINIA P. ONE WORTHINGTON ST. SHAWNEE-ON DELAWARE, P	2. NAME: ☐ Change ☐ Addition
NAME: D SHEBELSKY, ROBERT A. RD #6 BOX 6278 EAST STROUDSBURG PA	3. NAME: ☐ Change ☐ Addition
NAME: S PETERS, LEONA H ONE RIVER ROAD SHAWNEE ON DELAWARE PA	4. NAME: ☐ Change ☐ Addition
NAME: GM PONCE, LUIS ONE RIVER ROAD SHAWNEE ON DELAWARE PA	5. NAME: ☐ Change ☐ Addition
NAME: AS HENDRICKS, CRAIG A ONE RIVER ROAD SHAWNEE ON DELAWARE PA	6. NAME: ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.05, (b)(1) Florida Statutes. I further certify that the information included 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 business representative to whom this report is required by Chapter 222, Florida Statutes, and that my name appears on Block 12 or Block 13 of this change of officer or director filing with an address.

SIGNATURE: **Charles W. KIRKWOOD, Pres. 3/ /95 717-421-6513**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR