

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 AM 11:51

DOCUMENT # M67753

(7)

1. Corporation Name

FATHER AND TWO SONS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
% RICHARD MASON
122 SOUTH CORY DR.
EDGEWATER FL 32141

Mailing Address
% RICHARD MASON
122 SOUTH CORY DR.
EDGEWATER FL 32141

3. Date Incorporated or Qualified
02/05/1988

3a. Date of Last Report
01/25/1994

4. FEI Number
07-6307294

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. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

MASON, RICHARD
122 SOUTH CORY DR.
EDGEWATER FL 32032

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MASON, RICHARD	1.2 NAME	
STREET ADDRESS	122 S. CORY DR.	1.3 STREET ADDRESS	
CITY- ST- ZIP	EDGEWATER FL	1.4 CITY- ST- ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MASON, JAMES	2.2 NAME	
STREET ADDRESS	3331 JUNIPER DR	2.3 STREET ADDRESS	
CITY- ST- ZIP	EDGEWATER FL	2.4 CITY- ST- ZIP	
TITLE	TD	3.1 TITLE	☐ Change ☐ Addition
NAME	MASON, BRIAN	3.2 NAME	
STREET ADDRESS	2931 WOODLAND DR	3.3 STREET ADDRESS	
CITY- ST- ZIP	EDGEWATER FL	3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 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 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 its 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 as changed, or on an attachment with an address.

SIGNATURE:

Richard H. Mason

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Block #

1-31-95