

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # M69025 (8)

1. Corporation Name

AUTODUCT OF FLORIDA, INC.



Principal Place of Business

6670 WHITE DRIVE  
WEST PALM BEACH FL 33407

Mailing Address

6670 WHITE DRIVE  
WEST PALM BEACH FL 33407

3. Date Incorporated or Qualified

02/12/1988

3a. Date of Last Report

03/22/1995

2. Principal Place of Business

21 7555 Garden Road

22 Suite, Apt. #, etc.

23 City & State  
Riviera Beach, FL

24 Zip 33404

25 Country USA

2a. Mailing Address

26 P. O. Box 9876

27 Suite, Apt. #, etc.

28 City & State  
Riviera Beach, FL

29 Zip 33419

30 Country USA

4. FEI Number

65-0050288

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

9. Name and Address of Current Registered Agent

MCINTOSH ROBERT P.  
5200 N. OCEAN DR.  
#1502  
SINGER ISLAND FL 33404

10. Name and Address of New Registered Agent

81 Name

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

5250 N. Ocean Dr.

83

4N

84 City

Riviera Beach

FL

85 Zip Code

33404

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

*Robert P. McIntosh*

Robert P. McIntosh

7/26/96

Signature typed or printed name of registered agent and fee applicant

Date of Registered Agent signature required when new statement

Date

12. OFFICERS AND DIRECTORS

TITLE  
NAME PD  
STREET ADDRESS MCINTOSH, ROBERT P.  
CITY-ST-ZIP 6670 WHITE DRIVE  
WEST PALM BEACH 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
7555 Garden Road  
Riviera Beach, FL 33404

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 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:

*Robert P. McIntosh*

Robert P. McIntosh

7/26/96

407 844-2237

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)