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

APPROVED
AND
FILED

95 MAY -1 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M82099** **(6)**

1. Corporate Name
VALIANT INCORPORATED

Principal Place of Business
P. O. BOX 2061
LAKELAND FL 33806-9061

Mailing Address
P. O BOX 2061
LAKELAND FL 33806-9061

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
05/23/1988	04/28/1994

21 2. Principal Place of Business	26 2a. Mailing Address
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 County	29 Zip / 30 County

4. IRS Number: **NOT APPLICABLE** — 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/will be electing to be taxed as an "S" Corporation under the Internal Revenue Code.* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KELLEY, WILLIAM J. 6119 DOE CIR W LAKELAND FL 33809	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0501, 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

12. OFFICER AND DIRECTOR DATA	13. ADDITIONS, CHANGES TO OFFICER AND DIRECTOR DATA
Title: D Name: KELLEY, WILLIAM J. Street Address: ~~6119 DOE CIRCLE, W.~~ 3253 Big Cabbage Drive City-State-Zip: LAKELAND FL	☐ Change ☐ Addition
Title: D Name: FEY, RICHARD M. Street Address: 3543 COLLEEN DR. City-State-Zip: LAKELAND FL	☐ Change ☐ Addition
Title Name Street Address City-State-Zip	☐ Change ☐ Addition
Title Name Street Address City-State-Zip	☐ Change ☐ Addition
Title Name Street Address City-State-Zip	☐ Change ☐ Addition
Title Name Street Address City-State-Zip	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurate and that such information complies with the requirements of Section 607.0501, Florida Statutes. I further certify that the information indicated on this 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 a director or officer 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 above or on an attachment with an address.

SIGNATURE: William J. Kelley William J. Kelley 4/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date

0447187 FP