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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M98308

(3)

1. Corporation Name
ROSWELL SERVICES, INC.



Principal Place of Business
3106 TAMiami TRAIL N., STE. 107
NAPLES FL 33940

Mailing Address
3106 TAMiami TRAIL N., STE. 107
NAPLES FL 34103-4103

3. Date Incorporated or Qualified
09/13/1988

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0091647

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

24 34103

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TORP, RONALD L. JR.
349 PINEHURST CIR.
NAPLES FL 33962

81 Name

Ronald L. Torp, Jr.

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

83

84 City

Naples,

FL

85 Zip Code
34113

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME TORP, RONALD L. JR.
STREET ADDRESS 349 PINEHURST CIR.
CITY-ST-ZIP NAPLES FL 33962

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Ronald L. Torp, Jr.
1.3 STREET ADDRESS 349 Pinehurst Cir.
1.4 CITY-ST-ZIP Naples, FL 34113

TITLE STD ☐ DELETE
NAME TORP, KATHY
STREET ADDRESS 349 PINEHURST CIR.
CITY-ST-ZIP NAPLES FL 33962

2.1 TITLE STD ☒ Change ☐ Addition
2.2 NAME Kathy Torp
2.3 STREET ADDRESS 349 Pinehurst Cir.
2.4 CITY-ST-ZIP Naples, FL 34113

TITLE D ☐ DELETE
NAME SLEBODNIK, ROBERT
STREET ADDRESS 32 PEBBLE BEACH BLVD.
CITY-ST-ZIP NAPLES FL 33962

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME Robert Slebochnik
3.3 STREET ADDRESS 32 Pebble Beach Blvd.
3.4 CITY-ST-ZIP Naples, FL 34113

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Ronald L. Torp, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-97
Date

Daytime Phone #

CR2E034 (9/96)