

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M99550 (9)

1. Corporation Name

RICHNEAL CORPORATION

Principal Place of Business
Z RICHARD A. COFFMAN
3360 SO. OCEAN BLVD.
APT. 6H SOUTH
PALM BEACH, FL 33480

Mailing Address
Z RICHARD A. COFFMAN
3360 SO. OCEAN BLVD.
APT. 6H SOUTH
PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/21/1988	3a. Date of Last Report 02/07/94
4. FEI Number 65-0074905	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 Sute, Apt #, etc 22 City & State 23 Zip Country	2a. Mailing Address 26 Sute, Apt #, etc 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent
COFFMAN, RICHARD A.
3360 SOUTH OCEAN BLVD.
APT. 6H SOUTH
PALM BEACH, FL 33480

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 FL

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 reappointing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/P	1.1 TITLE	☐ Change ☐ Addition
NAME	COFFMAN, RICHARD A.	1.2 NAME	
STREET ADDRESS	3360 S. OCEAN BLVD., #6H S	1.3 STREET ADDRESS	
CITY ST ZIP	PALM BEACH, FL	1.4 CITY ST ZIP	
TITLE	D/T	2.1 TITLE	☐ Change ☐ Addition
NAME	COFFMAN, NEAL B.	2.2 NAME	
STREET ADDRESS	579 RACQUET CLUB RD, #11	2.3 STREET ADDRESS	
CITY ST ZIP	FT. LAUDERDALE, FL	2.4 CITY ST ZIP	
TITLE	C	3.1 TITLE	
NAME	FEINER, ELLIOT J.	3.2 NAME	
STREET ADDRESS	10 ROGERS STREET	3.3 STREET ADDRESS	
CITY ST ZIP	CAMBRIDGE, MA	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 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 appointment with an address.

SIGNATURE: X *Richard A. Coffman* RICHARD A. COFFMAN *April 26, 1995* (1407) 588-3262