

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N12879 (5)

1. Corporation Name

ASPHALT ANGELS, INC.



Principal Place of Business

C/O MALCOLM C. LINDSEY
12791 KAZEE ROAD
LOXAHATCHEE FL 33470-4732
US

Mailing Address

P O BOX 1643
326800WN FL 33470-4732
US

3. Date Incorporated or Qualified
12/31/1985

3a. Date of Last Report
08/04/1995

2. Principal Place of Business

21 **46 Richard F. Foreman**

2a. Mailing Address

26 **ASPHALT ANGELS INC**

4. FEI Number
59-2666916

Applied For
Not Applicable

Suite, Apt. #, etc.

22 **12231 Acapulco Ave**

Suite, Apt. #, etc.

27 **P.O. Box 460**

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

City & State

23 **Palm Bch, Gardens FL**

City & State

28 **LOXAHATCHEE FL**

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

Zip

24 **33410**

Country

25 **US**

Zip

29 **33470**

Country

30 **US**

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

9. Name and Address of Current Registered Agent

LINDSEY, MALCOLM C.
12791 KAZEE RD.
LOXAHATCHEE FL

10. Name and Address of New Registered Agent

81 Name

Richard F. Foreman

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

12231 ACAPULCO AVE

83

84 City

Palm Bch, Gardens FL

85 Zip Code

33410

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Richard F. Foreman

Richard F. Foreman

4-29-96

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME **PD TILLERY, DONALD R**
STREET ADDRESS **360 BUSINESS PKWY #10**
CITY-ST-ZIP **ROYAL PALM BCH FL**

TITLE ☒ DELETE

NAME **TD MILLESON, JOANNE**
STREET ADDRESS **13530 59TH COURT N**
CITY-ST-ZIP **ROYAL PALM BEACH FL**

TITLE ☒ DELETE

NAME **VD FOREMAN, RICHARD**
STREET ADDRESS **12231 ACAPULCO AVE**
CITY-ST-ZIP **PALM BCH GARDENS FL**

TITLE ☒ DELETE

NAME **S ARNOLD, LISA**
STREET ADDRESS **14678 CITRUS GROVE BLVD**
CITY-ST-ZIP **LOXAHATCHEE FL**

TITLE ☐ DELETE

NAME **D HILL, LARRY**
STREET ADDRESS **14964 19TH ST N**
CITY-ST-ZIP **LOXAHATCHEE FL**

TITLE ☐ DELETE

NAME **D ALLISON, ROGER**
STREET ADDRESS **11331 67TH PLACE N**
CITY-ST-ZIP **ROYAL PALM BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME **PD Richard F. Foreman**
1.2 STREET ADDRESS **12231 ACAPULCO AVE.**
1.3 CITY-ST-ZIP **PALM BEACH GARDENS FL, 33410**

2.1 TITLE ☒ Change ☐ Addition

NAME **TD NEILE NELSON**
2.2 STREET ADDRESS **12231 ACAPULCO AVE**
2.3 CITY-ST-ZIP **PALM BEACH GARDENS FL, 33410**

2.4 CITY-ST-ZIP ☒ Change ☐ Addition

3.1 TITLE ☒ Change ☐ Addition

NAME **VD KEITH BERGQUEST**
3.2 STREET ADDRESS **56 BARBERTON RD**
3.3 CITY-ST-ZIP **LAKE WORTH FL, 33467**

4.1 TITLE ☒ Change ☐ Addition

NAME **S Joy ALLISON**
4.2 STREET ADDRESS **11331 67TH PLACE No.**
4.3 CITY-ST-ZIP **ROYAL PALM BEACH FL, 33412**

5.1 TITLE ☐ Change ☒ Addition

NAME **D LARRY HILL**
5.2 STREET ADDRESS **100 CENAS KONK**
5.3 CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

6.1 TITLE ☐ Change ☐ Addition

NAME **D**
6.2 STREET ADDRESS
6.3 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard F. Foreman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 407-647-0425
Date Daytime Phone #

CR2E037 (12/95)