FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY -1 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N44365** **(7)**

1. Corporate Name
PARA PALS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
956 N. U.S. 1 #1105 COCOA FL 32922 US	P O BOX 1237 COCOA FL 32902-1237 US

3. Date Incorporated or Qualified: 07/19/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3073169 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21: 5201 SANBOURNE St.
2a. Mailing Address — 26: P.O. Box 1237
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23: Cocoa, FL
City & State — 28: Cocoa, FL
Zip — 24: 32927 Country — 25: BREVARD
Zip — 29: 32923 Country — 30: BREVARD

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FLEMING, JESSIE O
956 N. U.S. 1
SUITE 1105
COCOA FL 32922

10. Name and Address of New Registered Agent

81 Name: Jessie O. Fleming
82 Street Address (P.O. Box Number is Not Acceptable): 5201 SANBOURNE ST.
83:
84 City: Cocoa FL 85 Zip Code: 32927

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: Jessie O. Fleming — Jessie O. Fleming Exec. Director — 4/25/95
(Signature of New Registered Agent, if changed) (Name & Capacity of New Registered Agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
10 TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	RUHLE, JEANNINE	12 NAME	
STREET ADDRESS	2125 MUSKINGUM AVE.	13 STREET ADDRESS	
CITY ST ZIP	COCOA FL	14 CITY ST ZIP	
20 TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	WILSON, LORI J	22 NAME	
STREET ADDRESS	1330 STETSON CT	23 STREET ADDRESS	
CITY ST ZIP	COCOA FL	24 CITY ST ZIP	
30 TITLE	STD	31 TITLE	☐ Change ☐ Addition
NAME	FLEMING, DIANE J	32 NAME	
STREET ADDRESS	5201 SANBOURNE ST	33 STREET ADDRESS	
CITY ST ZIP	COCOA FL	34 CITY ST ZIP	
40 TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	MEDLEY, SUE	42 NAME	
STREET ADDRESS	2309 ZEV CT	43 STREET ADDRESS	
CITY ST ZIP	OWENSBORO KY	44 CITY ST ZIP	
50 TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	FLEMING, JESSIE O	52 NAME	
STREET ADDRESS	5201 SANBOURNE ST.	53 STREET ADDRESS	
CITY ST ZIP	COCOA FL	54 CITY ST ZIP	
60 TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jessie O. Fleming Exec Director — 4/25/95 — (407) 636-0420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0035887