

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 # N94000004529 (3)

1. Corporation Name

THE SFPC CORPORATION



Principal Place of Business

**355 S.W. 35TH AVE
DEERFIELD BEACH FL 33442**

Mailing Address

**355 S.W. 35TH AVE
DEERFIELD BEACH FL 33442**

3. Date Incorporated or Qualified
09/09/1994

3a. Date of Last Report
11/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0609043

Applied For
Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc.

22
City & State

27
City & State

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

25

Country

29

30

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RADIS, RICHARD
1265 N. RIO VISTA BLVD
FT. LAUDERDALE FL 33316**

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 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **LOMBARDO, RONALD**
STREET ADDRESS **3860 EAST 8TH LANE**
CITY-ST-ZIP **HIALEAH FL 33013**

TITLE **D** ☐ DELETE
NAME **KACHELINE, DENNIS**
STREET ADDRESS **355 SW 35TH AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33442**

TITLE **D** ☐ DELETE
NAME **BELLMAN, RALPH**
STREET ADDRESS **4610 SW 166TH AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33331**

TITLE **D** ☐ DELETE
NAME **RADIS, RICHARD A**
STREET ADDRESS **1265 N RIO VISTA BLVD**
CITY-ST-ZIP **FT LAUDERDALE FL 33316**

TITLE **D** ☐ DELETE
NAME **BROWN, EDWARD L.**
STREET ADDRESS **5821 S.W. 17TH COURT**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME **RONALD LOMBARDI**
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP **Deerfield Beach, FL 33442**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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)(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 677, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD ALAN RADIS

Date

Daytime Phone #

CR2E037 (12/95)