## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



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

1996

DOCUM	MENT	# <b>N940</b> 0		)5887 (4)						
		CAN WAY, INC.								
Principal Place of Business			N	Mailing Address			1 (03)(1)(0) 0) 0 (0)(1) 0 (0)(1) 30(1) 0	TANK BUTAN MEMBENGAN MAJA	41 1 10 10 1 E0111 10 10 10 10 11	
510 VONDERBURG DR. SUITE 3002 BRANDON FL 33511				510 VONDERBURG DR. SUITE 3002 BRANDON FL 33511						
OTHER DISTRICT	<b>3</b>		•	DIMPORTE GOOT			3. Date Incorporated or Qualifie 11/30/1994		Last Report 1/1995	
Principal Place of Business			2a 26	2a. Mailing Address			4. FEI Number 59-3279280		Applied For Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			5. Certificate of Status Desired	11 7	8.75 Additional Fee Required	
City & State				City & State			6. Election Campaign Financing Trust Fund Contribution  S5.00 May Be Added to Fees			
Zip <b>24</b>	Country 25		29	Zip	Country	'	8. This corporation has liability	8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes  Yes No		
9. Name and Address of Current Registered Agent					1001		10. Name and Address of New		t	
					81	Name				
VAUGHAN, DAVID R					82	Street A	t Address (P.O. Box Number is Not Acceptable)			
510 YONDERBURG DR.										
SUNE 3002					83					
BRANDON FL 33511					84	City		FL 85	Zip Code	
or register	ed agent, or	both, in the State of FI	orida Suc	17.1508, Florida Statute ch change was authorize 7.0503, Florida Statutes.	s, the above ted by the corp	named co oration's	rporation submits this statement for the board of directors. I hereby accept the a	purpose of changing ppointment as regis	its registered office tered agent. I am	
SIGNATURE _					T. Constant Ann		equired when reinstating)	DATE		
12.	aigriature, typeu	or printed name of registered as OFFICERS A			13.	it signature re	ADDITIONS CHANGES TO C		CTORS IN 12	
TITLE	DOELETE					D -	☐ Cha	ange 🔣 Addition		
NAME	VAUGHAN, DAVID R			1			Robert E. Surtees		,	
STREET ADDRESS 510 VONDERBURG DR., SUIT			IITE 300	3002		ADDRESS	6475 Holland Drive			
CITY-ST-ZIP BRANDON FL 33511					1.4 CITY - ST - ZIP		Cumming, GA 30131			
TITLE	D			<b>⊠</b> DELETE	2.1 TITLE		$\mathfrak{D}$	Cha	ange 🙀 Addition	
NAME	FIELDS, JERRY L						James N. Finley			
STREET ADDRESS 2611 BRIANHOLLY DR.						ADDRESS		4460 Baton Rouge Drive		
CITY-ST-ZIP VALRICO FL 33594				<b>M</b> on ere		ST-ZIP	_Hermitage, TN 37076		- 1 4 1 PM	
TITLE	D	ם בסבח א		DELETE	3 1 TITLE 3 2 NAME			Cha	ange 🔲 Addition	
NAME BOEHMER, FRED H STREET ADDRESS 2710 FAIRWAY VIEW DR.						. Ancincoc				
VALDICO EL 22504					3 3 STREET					
CITY-ST-ZIP TITLE				DELETE	3.4 CITY -: 4.1 TITLE	51 ZIP		☐ Cha	ange	
NAME				<u></u>	4 2 NAME					
STREET ADDRESS					4.3 STREET	LADCRESS				
CITY-ST-ZIP					4 4 CITY - 9					
TITLE				DELETE	5 1 TITLE		4000019	acea 급입	nge 🔲 Addition	
NAME					5.2 NAME		4000018 -06/10/960	1021022	1	
STREET ADDRESS					5 3 STREET	ADDRESS	***61.25			
CITY-ST-ZIP					5 4 CITY - 5	3T - Z:P			,	
TITLE				DELETE	61 TITLE			☐ Cha	ange Addition	
NAME					6.2 NAME			~ /\	140 I	
STREET ADDRESS					6 3 STREET	ADDRESS		(a' l'	20	
CITY-SI-ZIP 64  14. Fido hereby certify that the information supplied with this filing is voluntarily furnished an						T · ZIP	life for the execution stated in Section 1	19.07/3/W. Florida	Statutes, I further	
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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 or an attachment with an address. OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

8/3-651-4/84