

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P19611

(3)

1. Corporation Name

TODHUNTER IMPORTS, LTD., CO.



Principal Place of Business

Mailing Address

222 LAKEVIEW AVENUE
SUITE 290
WEST PALM BEACH FL 33401
US

222 LAKEVIEW AVENUE
SUITE 290
WEST PALM BEACH FL 33401
US

3. Date Incorporated or Qualified

06/10/1988

3a. Date of Last Report

06/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 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 below (signatures required when changing)

(If Officer or Registered Agent signature required when changing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

MALTBY, JAY S

☒ DELETE

NAME

STREET ADDRESS

15100 S.W. 74TH AVENUE

CITY-STATE-ZIP

MIAMI FL

TITLE

VP

MASI, HARRY

☒ DELETE

NAME

STREET ADDRESS

517 CLUB DRIVE

CITY-STATE-ZIP

PALM BEACH GARDENS FL

TITLE

AS

MCCARTHY, DIANE

☒ DELETE

NAME

STREET ADDRESS

3901 S. FLAGLER DRIVE

CITY-STATE-ZIP

WEST PALM BEACH FL

TITLE

T

EDWARDS, TROY

☐ DELETE

NAME

STREET ADDRESS

148 SANTA MONICA AVENUE

CITY-STATE-ZIP

ROYAL PALM BEACH FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.1 TITLE

President

☒ Change ☒ Addition

1.2 NAME

Thomas A. Valdes

1.3 STREET ADDRESS

222 Lakeview Ave, #290

1.4 CITY-STATE-ZIP

West Palm Beach, Fl 33401

2.1 TITLE

Vice President

☒ Change ☒ Addition

2.2 NAME

Terry V. Karr

2.3 STREET ADDRESS

295 So. Ramona Ave

2.4 CITY-STATE-ZIP

Lake Alfred, Fl 33850

3.1 TITLE

Assistant Secretary

☒ Change ☐ Addition

3.2 NAME

Judith A. Baker

3.3 STREET ADDRESS

1307 Carr Dr.

3.4 CITY-STATE-ZIP

Auburndale, Fl 33823

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Troy Edwards

Date

Daytime Phone #

CR2E034 (12/95)