

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 # **P19924** (0)

1. Corporation Name

AMERICAN PREMIER, INC.



Principal Place of Business

Mailing Address

901 E. EIGHTH AVENUE
KING OF PRUSSIA PA 19406
US

1601 N.W. EXPRESSWAY SUITE 2210
SUITE#1210
OKLAHOMA CITY OK 73118
US

3. Date Incorporated or Qualified
07/05/1988

3a. Date of Last Report
04/21/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **1601 NW EXPRESSWAY**

22 City & State

27 **SUITE 1210**
City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

23-2517345

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

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

**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

Signer to be typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME **VP
VALENZA, ROBERT V.**
STREET ADDRESS **901 E 8TH AVENUE
KING OF PRUSSIA PA**
CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VPD
HILL, NICOLE F.**
STREET ADDRESS **72 CUMMINGS POINT ROAD
STAMFORD CT**
CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VP
LUFF, DONALD G.**
STREET ADDRESS **901 E 8TH AVENUE
KING OF PRUSSIA PA**
CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VP
WALTERS, THOMAS E.**
STREET ADDRESS **901 E 8TH AVE
KING OF PRUSSIA PA**
CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VP
MCDONALD, LEE T.**
STREET ADDRESS **901 E 8TH AVENUE
KING OF PRUSSIA PA**
CITY-ST-ZIP

TITLE ☐ DELETE

NAME **VP
HUBBARD, DONALD R.**
STREET ADDRESS **901 E 8TH AVENUE
KING OF PRUSSIA PA**
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ASST SECR

ROBERTSON, CHARLES J.

**1601 NW EXPRESSWAY STE 1210
OKLAHOMA CITY OK 73118**

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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: *Charles J. Robertson* **CHARLES ROBERTSON**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96

(405) 848-8855

Date

Daytime Phone #

CR2E034 (12/95)