

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -6 AM 10:03

DOCUMENT # P29115 (3)

1. Corporation Name

FINCH ENTERPRISES, INC.

Principal Place of Business

2100 EMERALD DUNES DR.
W. PALM BCH. FL 33411
US

Mailing Address

210 EMERALD DUNES DR.
W. PALM BCH. FL 33411
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/30/1990

3a. Date of Last Report

07/22/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Finch Enterprises, Inc.

Suite, Apt. #, etc.

27

P.O.Box 404

City & State

28

Isle of Palms, SC

Zip

29

29451

Country

30

4. FEI Number

57-0784034

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

FINCH, RAYMON R., JR.
909 PORCIANA DRIVE
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

Finch, Jr., Henry T.

82 Street Address (P.O. Box Number is Not Acceptable)

2100 Emerald Dunes Drive

83

West Palm Beach

84 City

West Palm Beach

FL

85 Zip Code
33411

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

Henry T. Finch, Jr.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	FINCH, RAYMON R., JR.
STREET ADDRESS	2100 EMERALD DUNE DR.
CITY - ST - ZIP	W. PALM BCH. FL
TITLE	VD
NAME	FINCH, RAYMON R., JR.
STREET ADDRESS	2100 EMERALD DUNE DR.
CITY - ST - ZIP	W. PALM BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	PSTD
1.3 STREET ADDRESS	Finch, Jr., Henry T.
1.4 CITY - ST - ZIP	P.O.Box 404 Isle of Palms, SC 29451
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Delete
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(3)(b), 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:

Henry T. Finch, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/15/95

Date

Signature Number 8