

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P35905** (9)

1. Corporation Name

QUASSY AMUSEMENT, INC.



Principal Place of Business

**P O BOX 135
MIDDLEBURY CT 06762
US**

Mailing Address

**P O BOX 135
MIDDLEBURY CT 06762
US**

3. Date Incorporated or Qualified

10/11/1991

3a. Date of Last Report

05/01/1995

4. Filing Fee

00-1204163

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. 199.03.

Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

2a. City & State

21

State, Apt. # et

26

State, Apt. # et

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

JOHN C FRANTZIS

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 (b)(2) and 608 (b)(2) 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 (b)(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of New Registered Agent

Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	FRANTZIS, JOHN	
STREET ADDRESS	1840 EDGEWATER DRIVE	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	VD	☐ DELETE
NAME	ANDERSON, ERIC	
STREET ADDRESS	ELEPHANT ROCK ROAD	
CITY-ST-ZIP	WOODBURY CT	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	☐ Change ☐ Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	☐ Change ☐ Addition
31 NAME	
32 STREET ADDRESS	
33 CITY-ST-ZIP	☐ Change ☐ Addition
41 NAME	
42 STREET ADDRESS	
43 CITY-ST-ZIP	☐ Change ☐ Addition
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	☐ Change ☐ Addition
61 TITLE	
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 its 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 of this filing or on an appointment with an address.

SIGNATURE:

John C. Frantzis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/96

203-785-1068
Telephone Number

CR2E034 (12/95)