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

PROFIT CORPORATION ANNUAL REPORT



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

1996

**DOCUMENT #** 1. Corporation Name

P92000007749 (4)

OUTDOOR MANAGEMENT SERVICES OF CENTRAL FLORIDA

INC. Principal Place of Business Mailing Address 700 6TH STREET, SW 700 6TH STREET, SW WINTER HAVEN FL 33880 WINTER HAVEN FL 33880 3. Date Incorporated or Qualified 3a. Date of Last Report 11/30/1992 05/01/1995 2. Francipal Place of Business 2a. Mailing Address 4 FELNumber Applied For 59-3153455 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DUGGER, RICHARD Street Address (P.O. Box Number is Not Acceptable) 82 700 6TH STREET, S.W. WINTER HAVEN FL 33880 83 84 City 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. Thereby 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 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 HILE DELETE 1 1 TITLE Change Addition DUGGER, RICHARD 5.355 12 NAME 104 BUCHANAN DRIVE STREET ADDRESS 13 STREET ADDRESS WINTER HAVEN FL 33884 CITY ST-ZIP 1.4 CITY - ST - ZIP TIFLE DELETE Change 2 1 TITLE ☐ Addition WEATHERS, REX G NAME 22 NAME 304 LOS PRADOS SUBSELLADORESS. 23 STREET ADDRESS SAFETY HARBOR FL 34695 CITY - ST - ZIP 24 CITY-ST-ZIP DELETE TIELF 3 1 TITLE Change ☐ Addition NSM 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY ST-26 34 CITY-ST-ZIP DELETE TITLE 4. 1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS. 4 3 STREET ADDRESS CHTY-ST ZIP 4.4 CITY - ST - ZIP DELETE TIFLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-28 54 CITY-ST-ZIP THEF DELETE 6 1 TITLE Change Addition

NAME

SERVEL LATITIONESS.

CITY - 51 - 216

appears in Block 12 or Block 13 if changed, or on an attachment with an address

6.2 NAME

6.3 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 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

**CR2E034**