

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000003951 (9)

1. Corporation Name

TERRAPIN SERVICES, INC.



Principal Place of Business

1861 PLACIDA ROAD
SUITE 104
ENGLEWOOD FL 34223

Mailing Address

1861 PLACIDA ROAD
SUITE 104
ENGLEWOOD FL 34223

2. Principal Place of Business

2a. Mailing Address

21 1861 Placida Road

26 1861 Placida Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 204

27 Suite 204

City & State

City & State

23 Englewood FL

28 Englewood FL

Zip

Country

Zip

Country

24 34223

25

29 34223

30

9. Name and Address of Current Registered Agent

BATSEL, C. GUY
% BATSEL, MCKINLEY & ITTERSAGEN, P.A.
1861 PLACIDA ROAD, SUITE 104
ENGLEWOOD FL 34223

3. Date Incorporated or Qualified
01/19/1993

3a. Date of Last Report
05/01/1995

4. FET Number
65-0381456

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

10. Name and Address of New Registered Agent

81 Name

Batset, C. Guy

82 Street Address, P.O. Box Number, if Not Applicable

1861 Placida Road

83 Suite

Suite 204

84 City

Englewood

FL

85 Zip Code

34223

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 of Registered Agent or authorized representative of the corporation

Signature of Registered Agent or authorized representative of the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	WISKOWSKI, DOUGLAS	☐ DELETE
NAME		110 MARK TWAIN LANE	
STREET ADDRESS		ROTONDA FL	
CITY-ST-ZIP			
TITLE	D	BATSEL, C. GUY	☐ DELETE
NAME		1861 PLACIDA ROAD, SUITE 104	
STREET ADDRESS		ENGLEWOOD FL 34223	
CITY-ST-ZIP			
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

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Batset, C. Guy
2.3 STREET ADDRESS	1861 Placida Road, Suite 204
2.4 CITY-ST-ZIP	Englewood FL 34223
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 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 in an attachment with an address.

SIGNATURE:

Douglas Wiskowski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

991-697-1037

CR2E034 (12/95)