FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
SUNBIZ.ORG
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000026051 (1)

1. Corporate Name
OLD FLORIDA CHARM, INC.

Principal Place of Business
921 NORTH ST.
FT MYERS BEACH FL 33931

Mailing Address
921 NORTH ST.
FT MYERS BEACH FL 33931

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/05/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. # or Bldg.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. # or Bldg.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 65-0400565
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. Does corporation qualify for exemption fee under § 199.032, Florida Statutes? ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

ELLISON, LARRY D
17274 SAN CARLOS BLVD.
#202
FT. MYERS BEACH FL 33931

10. Name and Address of New Registered Agent

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 Section 607.0505 and 607.1008, 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. The corporation agrees that it will comply with the laws of this state that are applicable to the performance of its duties as a foreign corporation doing business in Florida, and accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TYPE	D
NAME	LALLO, JOHN D
STREET ADDRESS	921 NORTH ST.
CITY, ST, ZIP	FT. MYERS BEACH FL 33931
TYPE	D
NAME	LALLO, DEBORAH L
STREET ADDRESS	921 NORTH ST.
CITY, ST, ZIP	FT. MYERS BEACH FL 33931
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (Page 2)

TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	☐ Change ☐ Addition
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NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is accurately transcribed and does not modify the information stated in Section 607.0501, Florida Statutes. I further certify that the information contained in the 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 the 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: Deborah L Lallo Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-95 813-454-6222
DATE TELEPHONE

0324449 CP