

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 # **P93000033959 (6)**

1. Corporation Name

ASSOCIATED VIDEO COMMUNICATIONS, INC.



Principal Place of Business

**1031 N.W. 91ST TERRACE
GAINESVILLE FL 32606**

Mailing Address

**1031 N.W. 91ST TERRACE
GAINESVILLE FL 32606**

2. Principal Place of Business

2a. Mailing Address

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26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

**HOFFMAN, F. JEROME
1031 N.W. 91ST TERRACE
GAINESVILLE FL 32606**

3. Date Incorporated or Qualified

05/01/1993

3a. Date of Last Report

06/09/1995

4. FET Number

59-3182124

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

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

83.

84. City

FL

85.

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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, Sections 607.0502, Florida Statutes.

SIGNATURE

12. Registered Agent's Signature

13. Registered Agent's Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

P

☐ DELETE

2. NAME

HOFFMAN, NORMA

3. STREET ADDRESS

1031 NW 91ST TERRACE

4. CITY, ST, ZIP

GAINESVILLE FL

5. TITLE

VPGM

☐ DELETE

6. NAME

HOFFMAN, JEROME

7. STREET ADDRESS

1031 NW 91ST TERRACE

8. CITY, ST, ZIP

GAINESVILLE FL

9. TITLE

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10. NAME

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