

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 # P93000034852 (2)

1. Corporation Name

FIRST BORN, INC.



Principal Place of Business

210 ALDO DR
BABSON PARK FL 33827

Mailing Address

36 WEST WALL STREET
FROSTPROOF FL 33843
US

3. Date Incorporated or Qualified

05/13/1993

3a. Date of Last Report

06/22/1995

2. Principal Place of Business

21 Street, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Street, Apt. #, etc.

27 City & State

28 Zip

Country

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30

4. FEI Number

59-3183882

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

9. Name and Address of Current Registered Agent

PATRICK, CARLTON R JR
210 ALDO DR
BABSON PARK FL 33827

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 607.1504, 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 person filing this report (if not the owner)

Signature of Registered Agent (signature required when changing)

DATE

DATE

12. OFFICERS AND DIRECTORS

1. NAME
D PATRICK, CARLTON R JR
210 ALDO DR
BABSON PARK FL 33827
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D PATRICK, NICKY K
210 ALDO DR
BABSON PARK FL 33827
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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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 on an attachment with an address.

SIGNATURE: Nicky Patrick Nicky Patrick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 JAN 96

941-635 6717

CR2E034 (12/95)