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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000038590 (4)

1. Corporation Name
ATCO PRODUCTS, INC.

Principal Place of Business
200 E NEW ENGLAND AVE
SUITE 301
WINTER PARK FL 32789

Mailing Address
P.O. BOX 2146
WINTER PARK FL 32780-2146
US



2. Principal Place of Business

21 222 W. Cornstock Ave.

Suite, Apt. #, etc.

22 Suite 210

City & State

23 Winter Park, FL

Zip

24 32789

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

05/28/1993

3a. Date of Last Report

01/29/1996

4. FEI Number

75-2503442

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

HANDY, F. PHILIP
200 E NEW ENGLAND AVE
SUITE 301
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name

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

83 222 W. Cornstock Ave, Suite 210

84

City

Winter Park

FL

85

Zip Code

32789

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HANDY, F. PHILIP
STREET ADDRESS 200 E NEW ENGLAND AVE SUITE 301
CITY-ST-ZIP WINTER PARK FL 32789

TITLE D ☐ DELETE

NAME GAFFNEY, THOMAS
STREET ADDRESS 200 E NEW ENGLAND AVE
CITY-ST-ZIP WINTER PARK FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
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 222 W. Cornstock Ave, Suite 210
1.4 CITY-ST-ZIP Winter Park, FL 32789

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 222 W. Cornstock Ave, Suite 210
2.4 CITY-ST-ZIP Winter Park, FL 32789

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

F. Philip Handy

REQUIRED

1/29/97

407-644-9700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)