

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Carole B. Wooten
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

25 MAY -1 AM 4:25

DOCUMENT # P93000049507 (5)

VENTURE COMMUNICATIONS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4510 SATIN LEAF LANE
SARASOTA FL 34241

4510 SATIN LEAF LANE
SARASOTA FL 34241

DID NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/09/1993
3a. Date of Last Report 08/08/1994

4. FEI Number 65-0422086
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

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. # etc.

26. Suite, Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUGGAN, JAMES A
4510 SATIN LEAF LANE
SARASOTA FL 34241

81. Name

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

83. City

84. City

FL

85. Zip Code

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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent for the Corporation

Signature of Registered Agent or Registered Agent for the Corporation

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	DUGGAN, JAMES A
STREET ADDRESS	4510 SATIN LEAF LANE
CITY, ST, ZIP	SARASOTA FL 34241
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
1.1 NAME	
1.1 STREET ADDRESS	
1.1 CITY, ST, ZIP	
2. TITLE	☐ Change ☐ Addition
2.1 NAME	
2.1 STREET ADDRESS	
2.1 CITY, ST, ZIP	
3. TITLE	☐ Change ☐ Addition
3.1 NAME	
3.1 STREET ADDRESS	
3.1 CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
4.1 NAME	
4.1 STREET ADDRESS	
4.1 CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
5.1 NAME	
5.1 STREET ADDRESS	
5.1 CITY, ST, ZIP	
6. TITLE	☐ Change ☐ Addition
6.1 NAME	
6.1 STREET ADDRESS	
6.1 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(1)(b), Florida Statutes. I further certify that the information included on this annual report, supplemental annual report, 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 owner or holder of securities owned by the corporation as required by Chapter 120, Florida Statutes, and that my name appears in Block 12, or Block 13, of this report, or on any other document with an address.

SIGNATURE:

J. A. Duggan (JAMES DUGGAN) 05/01/95 (813) 923-9526

**CORPORATION,
ANNUAL REPORT
1995**

1. $\mathcal{A} \subseteq \mathcal{B}$ and $\mathcal{B} \subseteq \mathcal{A}$ implies $\mathcal{A} = \mathcal{B}$.

350 HENDRICKS AVE
JACKSONVILLE FL 32207

35
3535 HENDRICKS AVE
JACKSONVILLE FL 32207

...the

		3. Date of Certificate of Qualification		3a. Date of Last Report	
		07/15/1993		05/01/1994	
2. Principal Place of Business		2a. Mailing Address		4. FIC Number	
21 3535 Hendricks Av		26 3535 Hendricks Av		59-3208612	
Suite Apt # etc		Suite Apt # etc		Applied For	
				Not Applicable	
22		27		5. Certificate of Status Dated	
				8/75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	
				Trust Fund Contributions	
23		28		5.00 May Be Added to Fees	
7. Other		8. Other		9. Other	
24		29		30	
25		30		31	
				10. Other	
				11. Other	
				12. Other	
				13. Other	
				14. Other	
				15. Other	
				16. Other	
				17. Other	
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				96. Other	
				97. Other	
				98. Other	
				99. Other	
				100. Other	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MCMENAMY, WILLIAM B 2925 BARNETT CENTER 50 NORTH LAURA STREET JACKSONVILLE FL 32202		81	Name
		82	Street Address (if Co. Has Multiple Registered Agents)
		83	
		84	City
		FL	85 Zip Code

11. I understand that the purpose of Section 106.01, Florida Statute, and Rule 10C, Florida Statutes, is to allow a natural or juridical person the statement for the purpose of changing its registered office or registered agent in both of the States of Florida. I agree and authorize that the representative of the person, Florida, and the appointment as registered agent, I am authorized to make the appointment of Section 106.01, Florida Statutes.

SP (NATION) **CORRECT IDN ONLY** *[Signature]* *7/28/93*

12. OFFICER'S NAME (Last, First, Middle)		13. ADDITIONAL CHANGE (Last, First, Middle, Address, City, State, Zip)	
NAME	D	NAME	
First Name	ARMES, BRUCE A	First Name	
Last Name	7201 SAN JOSE BLVD.	Last Name	
	JACKSONVILLE FL 32217		
Address		Address	
City		City	
State		State	
Zip		Zip	
Phone		Phone	
Other		Other	
Notes		Notes	
Comments		Comments	
Signature		Signature	
Date		Date	
Initials		Initials	
Print Name		Print Name	
Print Address		Print Address	
Print City		Print City	
Print State		Print State	
Print Zip		Print Zip	
Print Phone		Print Phone	
Print Other		Print Other	
Print Notes		Print Notes	
Print Comments		Print Comments	
Print Signature		Print Signature	
Print Date		Print Date	
Print Initials		Print Initials	
Print Print Name		Print Print Name	
Print Print Address		Print Print Address	
Print Print City		Print Print City	
Print Print State		Print Print State	
Print Print Zip		Print Print Zip	
Print Print Phone		Print Print Phone	
Print Print Other		Print Print Other	
Print Print Notes		Print Print Notes	
Print Print Comments		Print Print Comments	
Print Print Signature		Print Print Signature	
Print Print Date		Print Print Date	
Print Print Initials		Print Print Initials	
Print Print Print Name		Print Print Print Name	
Print Print Print Address		Print Print Print Address	
Print Print Print City		Print Print Print City	
Print Print Print State		Print Print Print State	
Print Print Print Zip		Print Print Print Zip	
Print Print Print Phone		Print Print Print Phone	
Print Print Print Other		Print Print Print Other	
Print Print Print Notes		Print Print Print Notes	
Print Print Print Comments		Print Print Print Comments	
Print Print Print Signature		Print Print Print Signature	
Print Print Print Date		Print Print Print Date	
Print Print Print Initials		Print Print Print Initials	
Print Print Print Print Name		Print Print Print Print Name	
Print Print Print Print Address		Print Print Print Print Address	
Print Print Print Print City		Print Print Print Print City	
Print Print Print Print State		Print Print Print Print State	
Print Print Print Print Zip		Print Print Print Print Zip	
Print Print Print Print Phone		Print Print Print Print Phone	
Print Print Print Print Other		Print Print Print Print Other	
Print Print Print Print Notes		Print Print Print Print Notes	
Print Print Print Print Comments		Print Print Print Print Comments	
Print Print Print Print Signature		Print Print Print Print Signature	
Print Print Print Print Date		Print Print Print Print Date	
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Print Print Print Print Print Print Print Print State		Print Print Print Print Print Print Print Print State	
Print Print Print Print Print Print Print Print Zip		Print Print Print Print Print Print Print Print Zip	

14. I, I. I. Gerasimov, certify that the information supplied with this document is true and correct, that the composition listed in the book (1971) does not include substances that have been found to be carcinogenic or mutagenic, and that the substances listed in the book are not carcinogenic or mutagenic. The book is prepared by I. I. Gerasimov, Head of the Institute of Chemistry, Academy of Sciences of the USSR, and the book is published by the Academy of Sciences of the USSR.

SIGNATURE: [Signature] 4/28/95 (904) 578-7450
SIGNATURE AND TYPE OR PRINTED NAME OF SHIPPING OFFICE OR DIRECTOR

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000050170 (8)

1. Corporation Name

MID-FLORIDA PAINTING, INC.

Principal Place of Business

373 N. WINSOME COURT
LAKE MARY FL 32746

Mailing Address

373 N. WINSOME COURT
LAKE MARY FL 32746

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

07/13/1983

3a. Date of Last Report

10/05/1994

4. FFI Number

59-3192232

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 delinquent tax under Chapter 207, Florida Statutes.

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

25

City & State

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

30

City & State

9. Name and Address of Current Registered Agent

CONTI, JOHN
373 N. WINSOME COURT
LAKE MARY FL 32746

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent for the Corporation

Signature of New Registered Agent or Registered Agent for the Corporation

ATTEST

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE NAME STREET ADDRESS CITY, ST, ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP
2. TITLE NAME STREET ADDRESS CITY, ST, ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP
3. TITLE NAME STREET ADDRESS CITY, ST, ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP
4. TITLE NAME STREET ADDRESS CITY, ST, ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP
5. TITLE NAME STREET ADDRESS CITY, ST, ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP
6. TITLE NAME STREET ADDRESS CITY, ST, ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and checked and signed by the officer or director of the corporation. 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. 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:

John Conti
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Conti

4/30/95

(407) 330-4808