

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000054553 (1)**

1. Corporation Name

ALAN LAFLIN INC.



Principal Place of Business

**946-D HOWARD ST.
NICEVILLE FL 32578**

Mailing Address

**946-D HOWARD ST.
NICEVILLE FL 32578**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 **P.O. Box 4065**

27 City & State

28 **Fl. Walton Bch, FL**

29 Zip

32549

30 Country

U.S.A.

3. Date Incorporated or Qualified

08/02/1993

3a. Date of Last Report

02/17/1995

4. FEI Number

59-3193466

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

**LAFLIN, ALAN P
946 D HOWARD ST
NICEVILLE FL 32578**

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 607.1508, 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Alan Laflin

Alan Laflin

1-22-96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
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NAME
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CITY, ST, ZIP

**P
LAFLIN, ALAN
946 D HOWARD ST
NICEVILLE FL
V
BOWDEN, RICHARD D.
946-D HOWARD ST.
NICEVILLE FL
V
GYGI, PHILLIP
946-D HOWARD ST.
NICEVILLE FL
S
BELL, JONATHAN
946-D HOWARD ST.
NICEVILLE FL**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
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9. TITLE
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93. TITLE
94. NAME
95. STREET ADDRESS
96. CITY, ST, ZIP
97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY, ST, ZIP

32578

32578

Change

Addition

☒ Change

☐ Addition

32578

Change

Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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:

Alan Laflin Alan Laflin

1-22-96

585-0233

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Expiring Phone #

CR2E034 (12/95)