## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

Corporation Name	P93000054746	( I	)
IO ANN CARLTON	INC		

JO ANN CARLION, INC. Principal Place of Business Mailing Address



	i STREET FL 33541	7106 NARANJA STREE Zephyrhills fl 3354		3. Date Incorporated or Qualified	3a. Date of Last Report
··-···				08/02/1993	04/25/1995
2. Principal Pla		2a. Mailing Address		4. FEI Number 59-3195748	Applied For
1 7105 / Suite, Apt. #	, o. n	Suite, Apt #, etc.		3973 183740	Not Applicable
2		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	IRHILLS , FL	City & State  28 ZEPHYRHI  Zip	LLS FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ	Country		Country	8. This corporation has liability for it	ntangible tax under s. 199.032,
ك35 ق 4		29 <b>B354</b>	30	Florida Statutes	Yes No
	9. Name and Address of Curi	ent Registered Agent		10. Name and Address of New Reg	jistered Agent
CAR	KLTON, JO ANIN		81 Name		
	5 NARANJA STREET		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
	HYRHILLS FL 33541				_,
<b>CC</b> 1 1			83		
			84 City		85 Zip Code
			City		FL 85 Zip Code
agent I am SIGNATURE _	n familiar with, and accept the oblined familiar with, and accept the oblined familiar with the	igations of, Section 607.0505, i equal to the illappicable (h	Florida Statute's HOTE Registered Agent signature requ		6/5/96 DAFE
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	DELETE	1 1 Trill		Change Addition
NAME	CARLTON, JOANN		1.2 NAME		
170 3716					
	7105 NARANJA ST.		1.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			1.4 CITY - ST - ZIP		
STREET ADDRESS CITY-ST-ZIP	7105 NARANJA ST.	DELETE			Change Add Sor
STREET ADDRESS	7105 NARANJA ST.	DELETE	1.4 CITY - ST - ZIP		Change Addition
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Too nereby certify that the information supplied with this hing is voluntarily furnished and obes not quality for the exemption stated in Section 119 07(3)(x). Fronda Statutes 1 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: \_\_

6-5-96 (8/3) 783-6422