

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

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AND
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55 MAY 23 2:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Office of Corporations

DOCUMENT # P93000056140 (5)

To: Corporation Name

S.V.P. MAINTENANCE & REPAIR INC.

Principal Place of Business
9043 108TH AVENUE NORTH
LARGO FL 34647

Mailing Address
9043 108TH AVENUE NORTH
LARGO FL 34647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/09/1993
3a. Date of Last Report 06/20/1994

2. Principal Place of Business

21. State Apt. # etc.

22. City & State

23. Zip

24. Country

25. State Apt. # etc.

26. City & State

27. Zip

28. Country

29. State Apt. # etc.

30. City & State

31. Zip

32. Country

33. State Apt. # etc.

34. City & State

35. Zip

36. Country

37. State Apt. # etc.

38. City & State

39. Zip

40. Country

41. State Apt. # etc.

42. City & State

43. Zip

44. Country

45. State Apt. # etc.

46. City & State

47. Zip

48. Country

49. State Apt. # etc.

50. City & State

51. Zip

52. Country

53. State Apt. # etc.

54. City & State

55. Zip

56. Country

57. State Apt. # etc.

58. City & State

59. Zip

60. Country

61. State Apt. # etc.

62. City & State

63. Zip

64. Country

65. State Apt. # etc.

66. City & State

67. Zip

68. Country

69. State Apt. # etc.

70. City & State

71. Zip

72. Country

4. FFI Number
59-3194015

Applicant 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. 199.03? Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PRATHER, STEPHEN F
9043 108TH AVENUE NORTH
LARGO FL 34647

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 607.0402 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 *STEPHEN F PRATHER Stephen F Prather*

4/3/95

12. OFFICERS AND DIRECTORS

1. NAME
2. STREET ADDRESS
3. CITY, STATE, ZIP

D
PRATHER, STEPHEN F
9043 108TH AVENUE NORTH
LARGO FL 34647

4. NAME
5. STREET ADDRESS
6. CITY, STATE, ZIP

7. NAME
8. STREET ADDRESS
9. CITY, STATE, ZIP

10. NAME
11. STREET ADDRESS
12. CITY, STATE, ZIP

13. NAME
14. STREET ADDRESS
15. CITY, STATE, ZIP

16. NAME
17. STREET ADDRESS
18. CITY, STATE, ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

19. NAME
20. STREET ADDRESS
21. CITY, STATE, ZIP

☐ Change ☐ Addition

22. NAME
23. STREET ADDRESS
24. CITY, STATE, ZIP

☐ Change ☐ Addition

25. NAME
26. STREET ADDRESS
27. CITY, STATE, ZIP

☐ Change ☐ Addition

28. NAME
29. STREET ADDRESS
30. CITY, STATE, ZIP

☐ Change ☐ Addition

31. NAME
32. STREET ADDRESS
33. CITY, STATE, ZIP

☐ Change ☐ Addition

34. NAME
35. STREET ADDRESS
36. CITY, STATE, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stipulated in Section 199.03(6)(b), 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 registered or proposed registered agent for the corporation as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, 2 or Block 13 of changed, or on an attachment with an address.

SIGNATURE: *STEPHEN F PRATHER Stephen F Prather*

4/3/95

813 391 7735

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature