

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 1:11:36

DOCUMENT # P93000058132 (0)

1. Corporation Name

STANDING ROOM ONLY, INC.

Principal Place of Business

Mailing Address

15961 JOHN MORRIS ROAD
FT MYERS FL 33908

15961 JOHN MORRIS ROAD
FT MYERS FL 33908

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1993

3a. Date of Last Report

03/18/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0432342

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

21 11595 Kelly Road

26 11595 Kelly Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 319

27 Suite 319

City & State

City & State

23 Fort Myers, FL

28 Fort Myers, FL

Zip Country

Zip Country

24 33908 25 Lee

29 33908 30 Lee

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORE, KATHLEEN
15961 JOHN MORRIS ROAD
FT MYERS FL 33908

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, 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 fee if applicable)

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MORE, KATHLEEN
STREET ADDRESS 15961 JOHN MORRIS ROAD
CITY- ST- ZIP FT MYERS FL 33908

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

TITLE D
NAME STOCKER, VANESSA
STREET ADDRESS 15085 IONA LAKES DRIVE
CITY- ST- ZIP FT MYERS FL 33908

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kathleen More, President

3/09/95

(813)
454-5311