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

CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL	REPOF
10	OG.

1	996	DIVISION OF	CORPOR		DNS					
DOCUM 1. Corporation N	ENT # <b>P930</b>	00073890 (4	1)							
ROBER	RT C. WINDISCH, INC.									
Principal Place of	Business	Mailing Address				1   180   180   180   180   180   180   180   180   180   180   180   180   180   180   180   180   180   180			HIO (QIR) 9041 (QUI	
9105 ELUS F UNIT 7 & 8B		9105 ELLIS ROAD UNIT 7 7 8 B								
MELBOURNE US	FL J2904	US				3. Date Incorporated or Qualified 10/26/1993	05/	.ast Re <b>01/1</b> 9	•	
2. Principal Place	e of Business	2a. Mailing Address					Correct -0439269	$\vdash$	Applied For Not Applicable	-
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & State	A	City & State				6. Election Campaign Financing		\$5.0	0 May Be	
<b>23</b> Zip	Country	<b>[28]</b>	<b>├</b> ¬	untry		Trust Fund Contribution  8. This corporation has liability for	intangible tax ur		199.032,	
24	25   g. Name and Address of Curre	29   nt Registered Agent	30	1		Florida Statutes	s □No Registered Age	nt		}
				81	Name					
	CH, ROBERT C PENNWOOD DR.			82	Street Add	dress (P.O. Box Number is Not Accepta	ble)			1
	JRNE FL 32901			83	,					1
				84	City		FL	<b>5</b> Zip	Code	1
or registered	liagent, or both, in the State of Flor	ida. Such change was authorize	ed by the	corp	L named corpo oration's bo	pration submits this statement for the practice and directors. Thereby accept the ap-	urpose of changing	. L ig its r stered	egistered office agent. Fan	,
familiar with, SIGNATURE	and accept the obligations of, Sec	tion 607.0505, Florida Statutes								
\$1 <sub>2</sub>	juature, typed or profest race of registered ago.	Talenthes appliance (NO ND DIRECTORS	h θajatera 13.	1 April	4 Signations respon	ad wer reasonal  ADDITIONS/CHANGES TO OF	DATE	ECIC	IDS IN 13	_ §ે
12.	P	DELETE	1 11	TITLE	T-	ADDITIONS/CHANGES TO OF		hange	Addition	CR2E034 (12/95)
NAME	WINDISCH, ROBERT C		12 N	AME						8
STREET ADDRESS	2220 S. PENNWOOD DR.				ADDRESS					띭
CITY-ST-ZIP TITLE	MELBOURNE FL	☐ DELETE	1.4 C		I - ZIP		ПО	hange	☐ Addition	- 15
NAME			221				ا	larryo	L. Addition	
STREET ADDRESS					ADORESS					
CITY-ST-ZIP			240	HY-5	SI - ZIF					
TITLE		☐ DELETE	3 1	TILE				hange	☐ Addition	
NAME				IAMÉ						}
STREET ADORESS					T AUDRESS   St-zif					
CITY-ST-ZIP TITLE		☐ DELETE	4 1		31 - 211			hange	Addition	-
NAME			4 2 N	AMē						
STREET ADDRESS			4.3 5	TREET	ADDRESS					
C(TY-ST-Z)P					ST · ZIF					
TITLE		☐ DELETE	5 1				Ш	hange	Addition	
NAME STREET ADDRESS			52 N		ADDRESS					
CITY-ST-ZIP					SI - ZiP					
TITLE		□ DELETE 6 1 TIT						hange	Addition	1
NAME			621	IAME						
STREET ADDRESS			635	STREET	ADDRESS					
0/7Y-S1-ZIP	certify that the information considers	with this figure is within table free	·····		st-zje es not qualify	for the exemption stated in Section 11	9.07/3//E/ Fladals	State	tos I further	
certify that the coath; that I a	he information indicated on this ann	nua' report or supplemental anni ioration or the receiver or truster	ual report e empowe	is tru	ie and accu to execute t	rate and that my signature shall have the his report as required by Chapter 607,	e same lega! effe	ct as il	f made under	
SIGNATU		DE PRINTED NAME OF SIGNING OFFICE	R OR DIREC	έτοκ	T.	Date	Dayto	n Fhane		