

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Apr 30 1997 8:00am  
Secretary of State

DOCUMENT # P93000076620 (2)

1. Corporation Name

P.V.C. CHAIR COMPANY OF LAKE LAND, INC.

Principal Place of Business

235 STATE RD. 207  
SUITE 2B  
ST. AUGUSTINE FL 32085

Mailing Address

5731 S. FLORIDA AVE.  
SUITE 2B  
LAKE LAND FL 33813-2529  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

RICHARD GOLDRICH  
5731 S. FLORIDA AVE.  
SUITE 900  
LAKE LAND FL 33813

3. Date Incorporated or Qualified

11/04/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3209744

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

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Richard Goldrich* RICHARD GOLDRICH

1-21-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D BAROODY, TERRANCE A  
STREET ADDRESS 235 STATE RD. 207, STE. 2B  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☐ DELETE

NAME D GOLDRICH, RICHARD  
STREET ADDRESS 235 STATE RD. 207, STE. 2B  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☐ DELETE

NAME D OAKES, JOHN  
STREET ADDRESS 235 STATE RD. 207, STE. 2B  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☐ DELETE

NAME D HARDY, STEPHEN  
STREET ADDRESS 235 STATE RD. 207, STE. 2B  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Richard Goldrich* RICHARD GOLDRICH

4/25/97 901-144-7214

CR2E034 (9/96)