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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVIS:ON OF CORPORATIONS

1996

P93000078721 (6) **DOCUMENT #**

COLINTERRY ENTERPRISES, INC.

Principal	Place o	of Rusiness

Mailing Address

9131 130TH AVE N #514

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LANGO FL 34	1043	LANGO FL 34643					
						3. Date incorporated or Qualified 11/15/1993	3a. Date of Last Report 05/01/1995
2. Principal Place 21 /305		2a. Mailing Address 26 13051 - B	92	w 37	ĪN.	4. FEI Number , 59-3211942	Applied For Not Applicable
Suite, Apt. #		Suite, Ant #, etc.		 .		5. Certificate of Status Desired	\$8.75 Additional
Chull State		Ctu 8 State					Fee Required
City & State 23 A(2)	2a #	City & State 28 LARGO	H	_		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zio	Country	Zip	Country	<u>-</u>		8. This corporation has liability for i	
24 3464	3 25 USA	29 34643 3		31		Florida Statutes	
	9. Name and Address of Current R	legistered Agent	1 . [.,	,		10. Name and Address of New R	egistered Agent
			81	Name			
BEWLEY, COLIN 1359 RANCHWOOD DR CLEARWATER FL 34624		82	Street	Address	s (P.O. Box Number is Not Acceptab	le)	
			83				
			84	City			FL 85 Zrp Code
11. Pursuant to	the provisions of Sections 607.0502 ar	d 607.1508, Florida Statutes,	the above r	L named co	prporation	on submits this statement for the pur	pose of changing its registered office
or registere familiar with	d agent, or both, in the State of Florida. n, and accept the obligations of, Section	Such change was authorized I 607.0505, Florida Statutes.	by the corp	oration's	board (of directors. Thereby accept the appo	pintment as registered agent. Lam
SIGNATURE							
12.	lignature (typical or printed name of registered agent and OFFICERS AND D		Registered Ager 13.	tagnatur r	spote, lwl	ADDITIONS/CHANGES TO OFFI	LATE
TIFLE	P	DELETE	1 1 T TLF		P	ADDITIONS CHANGES TO OFFI	Change Addition
NAME	FAVERO, TERRY		1.2 NAME		Be	WLEY COLIN	
STREET ADDRESS	1872 INDIAN ROCKS RD		13 STREET	ADDRESS	139	WLEY, COLIN	l l
City - ST - ZIP	LARGO FL		14 CiTY - S	J - ZiP	Cu	earwater, Fl.	l
TITLE	VP	☐ DELFIE	2 1 TITLE		=		Change Addition
NAME	BEWLEY, COLIN		2.2 NAME				l
STREET ADDRESS	1359 RANCHWOOD DR		23 STREET	ADDRESS			l l
CITY+ST-ZIP	CLEARWATR FL		2.4 CITY - S	1 - ZiP			
TITLE		DECETE	3 % TITLE				Change
NAME			3.2 NAME				l l
STREET ADDRESS			3.3 STREE				l l
CITY - ST - ZIP TITLE		DELETE	3.4 CITY S 4.3 TIBLE	- 716			Change Addition
NAME		[] DECENT	4.2 NAME				Change L Addition
STREET ADDRESS			4.3.STHELT	SOJEMA			l
CITY-ST-ZIP			4.4 CITY - S				'
TITLE		☐ DELETE	5 1 TITLE				Change Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STP&E 1	ADDRESS			l l
CITY-ST-ZIP			5.4 CITY - S	1- Z P			
TITLE		DELETE	6 1 TITLE				Change Addition
NAME			6.2 NAME				· ·
STREET ADDRESS			6 3 STREET	ADDRESS			l
CITY - ST - ZIP			64 CHY-S				
14. I do hereby	certify that the information supplied with	i this filing is voluntarily furnish	ed and doe	s not qua	alify for t	the exemption stated in Section 119.	07(3)(k), Florida Statutes I furtner

ratio hereby certify that the information supplied with this anglis voluntarial terrifier and obes not quality for the exemption stated in Section 1.19.0 (a)(x), Florida Statutes Truffner 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 this corporation or the receiver or flustee 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: