

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

APPROVED
AND
FILED

95 APR 26 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000083205 (3)

1. Corporation Name

FLORIDA INDEPENDENT MATERIALS, INC.

Principal Place of Business

122 E. TILLMAN AVENUE
LAKE WALES FL 33853

Mailing Address

PO DRAWER 840
LAKE WALES FL 33859-0840

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/29/1993

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3211877

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, RONALD C
122 E. TILLMAN AVENUE
LAKE WALES FL 33853

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 City

FL

65

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD
NAME	JAHNA, E R JR
STREET ADDRESS	122 E. TILLMAN AVENUE
CITY - ST - ZIP	LAKE WALES FL 33853
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	PTD	☒ Change ☐ Addition
1.2 NAME	JAHNA, E R JR	
1.3 STREET ADDRESS	122 E. TILLMAN AVE.	
1.4 CITY - ST - ZIP	LAKE WALES FL	
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	JAHNA, EMIL R., III	
2.3 STREET ADDRESS	122 E. TILLMAN AVE.	
2.4 CITY - ST - ZIP	LAKE WALES FL	
3.1 TITLE	SD	☐ Change ☒ Addition
3.2 NAME	JOHNSON, RONALD C.	
3.3 STREET ADDRESS	122 E. TILLMAN AVE.	
3.4 CITY - ST - ZIP	LAKE WALES FL	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 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)(d), 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:

E. R. J.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Anytime Phone #

4/17/95

6076-9431