

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000003542 (5)

1. Corporation Name

CRAIG S. TALBOT MASONRY, INC.



Principal Place of Business

2215 VANDERVORT ROAD
LUTZ FL 33549-5705

Mailing Address

2215 VANDERVORT ROAD
LUTZ FL 33549-5705

3. Date Incorporated or Qualified

01/07/1994

3a. Date of Last Report

01/23/1995

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

59-3214939

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TALBOT, CRAIG S
2215 VANDERVORT ROAD
LUTZ FL 33549-5705

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 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent (must be signed by the Registered Agent)

Signature of Agent (must be signed by the Agent)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

11a. TITLE

11b. NAME

11c. STREET ADDRESS

11d. CITY, ST, ZIP

11e. TITLE

11f. NAME

11g. STREET ADDRESS

11h. CITY, ST, ZIP

11i. TITLE

11j. NAME

11k. STREET ADDRESS

11l. CITY, ST, ZIP

11m. TITLE

11n. NAME

11o. STREET ADDRESS

11p. CITY, ST, ZIP

11q. TITLE

11r. NAME

11s. STREET ADDRESS

11t. CITY, ST, ZIP

11u. TITLE

11v. NAME

11w. STREET ADDRESS

11x. CITY, ST, ZIP

11y. TITLE

11z. NAME

11aa. STREET ADDRESS

11ab. CITY, ST, ZIP

11ac. TITLE

11ad. NAME

11ae. STREET ADDRESS

11af. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY, ST, ZIP

13e. TITLE

13f. NAME

13g. STREET ADDRESS

13h. CITY, ST, ZIP

13i. TITLE

13j. NAME

13k. STREET ADDRESS

13l. CITY, ST, ZIP

13m. TITLE

13n. NAME

13o. STREET ADDRESS

13p. CITY, ST, ZIP

13q. TITLE

13r. NAME

13s. STREET ADDRESS

13t. CITY, ST, ZIP

13u. TITLE

13v. NAME

13w. STREET ADDRESS

13x. CITY, ST, ZIP

13y. TITLE

13z. NAME

13aa. STREET ADDRESS

13ab. CITY, ST, ZIP

13ac. TITLE

13ad. NAME

13ae. STREET ADDRESS

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 119.07(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 registered 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRAIG S. TALBOT

1/26/96

948-0219

CR2E034 (12/95)