

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 18 PM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000005575 (3)

1. Corporation Name

THE LAMB & THE LION BOOKSTORE, INC.

Principal Place of Business

703 MEDINA WAY
SUN CITY CENTER FL 33573

Mailing Address

703 MEDINA WAY
SUN CITY CENTER FL 33573

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/24/1994

3a. Date of Last Report

12-31-95

2. Principal Place of Business

21 910 N. Pebble Beach BL

Suite, Apt. #, etc.

22

City & State

23 Sun City Center FL

Zip

24 33573

Country

25 USA

2a. Mailing Address

26 910 N. Pebble Beach BL

Suite, Apt. #, etc.

27

City & State

28 Sun City Center FL

Zip

29 33573

Country

30 USA

4. FEI Number

59-322-1857

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. 190.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ANDERSON, WALLACE B JR.
101 E. KENNEDY BLVD.
BARNETT PLAZA, SUITE 1240
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

Anderson, Wallace B. Jr.

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

Carito, Fields 1 Harbour Place

83

84 City

Tampa

FL

85 Zip Code

33602

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KENNA, D. FAY A
703 MEDINA WAY
SUN CITY CENTER FL 33573

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
D/P
Kenna, D. Fay A
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
V
Kenna, Roswell E. Jr.
703 medina way
Sun City Center, FL 33573
☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
T/S
Kenna, Melissa J.
1020 malletwood
Brandon, FL 33510
☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

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 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:

D. Fay A. Kenna
D. Fay A. Kenna

4-6-95

713/633-8632