

3-18-97 B-3220 NC
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000006109 (0)

1. Corporation Name

J.W. FINCH & SON OF FLORIDA, INC.

Principal Place of Business

PO BOX 1603
LARGO FL 34640

Mailing Address

PO BOX 1603
LARGO FL 33779-1603

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

9. Name and Address of Current Registered Agent

FINCH, MICHAEL
990 5TH AVENUE NE
LARGO FL 34640

3. Date Incorporated or Qualified

01/25/1994

3a. Date of Last Report

04/09/1996

4. FEI Number

59-3225562

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and his or her title

(NOTE: Registered Agent signed and dated with corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐	DELETE
NAME	FINCH, J W		
STREET ADDRESS	990 5TH AVENUE NE		
CITY-ST-ZIP	LARGO FL 34640		
TITLE	D	☐	DELETE
NAME	FINCH, MICHAEL		
STREET ADDRESS	990 5TH AVENUE NE		
CITY-ST-ZIP	LARGO FL 34640		
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13.

1.1 TITLE	☐	Change	☐	Addition
1.2 NAME				
1.3 STREET ADDRESS				
1.4 CITY-ST-ZIP				
2.1 TITLE	☐	Change	☐	Addition
2.2 NAME				
2.3 STREET ADDRESS				
2.4 CITY-ST-ZIP				
3.1 TITLE	☐	Change	☐	Addition
3.2 NAME				
3.3 STREET ADDRESS				
3.4 CITY-ST-ZIP				
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 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:

J. W. Finch / J. W. Finch 3-14-97 5964505

CR2E034 (9/96)