

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000006118 (1)

1. Corporation Name

S. B. SANDERS & ASSOCIATES INC.

Principal Place of Business

18240 181ST CIRCLE SOUTH
BOCA RATON FL 33498

Mailing Address

18240 181ST CIRCLE SOUTH
BOCA RATON FL 33498

FILED

95 AUG -3 AM 9:58

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

01/24/1994

4. FEI Number

650 47 8073

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

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. 189.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANDERS, STEPHEN B
18240 181ST CIRCLE SOUTH
BOCA RATON FL 33498

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 607.0505, 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

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

PRESIDENT
STEPHEN BRIAN SANDERS
18240 181ST CIRCLE SOUTH
BOCA RATON FL 33498

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

SECRETARY - GENERAL - TREASURER
BEVERLY SANDERS
18240 181ST CIRCLE SOUTH
BOCA RATON FL 33498

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

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NAME

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CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS
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)(b), Florida Statutes. I further certify that the information submitted 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 007, 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

STEPHEN B. SANDERS

July 31 1995

407-482-1443