

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 # P94000006181 (9)

1. Corporation Name

MAY & HENRY, INC.



Principal Place of Business

4404 SOUTH FLORIDA AVENUE  
SUITE 14  
LAKELAND FL 33813

Mailing Address

4404 SOUTH FLORIDA AVENUE  
SUITE 14  
LAKELAND FL 33813

3. Date Incorporated or Qualified

01/25/1994

3a. Date of Last Report

01/25/1995

2. Principal Place of Business

21 4940 Southfork Drive

2a. Mailing Address

26 4940 Southfork Drive

4. FEI Number

59-3220304

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite 1

Suite, Apt. #, etc.

27 Suite 1

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23 Lakeland, Florida

City & State

28 Lakeland, Florida

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

Zip

24 33813

Country

25 Polk

Zip

29 33813

Country

30 Polk

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

CHRITTON, CHARLES P  
C/O WENDEL, CHRITTON & PARKS, CHARTERED  
5300 SOUTH FLORIDA AVENUE  
LAKELAND FL 33813

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, if Title is Applicable

(NOTE: Registered Agent Signature Required When Reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME KATHRYN, HENRY C  
STREET ADDRESS 1880 N. CRYSTAL LAKE DR #3  
CITY-ST-ZIP LAKELAND FL

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME Henry, Kathryn C.  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME RICHARD, MAY D  
STREET ADDRESS 5525 IMPERIALAKES BLVD #35  
CITY-ST-ZIP MULBERRY FL

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME May, Richard D.  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard D. May

04/29/96

(941) 644-3242

Date of Filing

CR2E034 (12/95)