

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY - 1 AM 10:15

DOCUMENT # P94000006286 (6)

1. Corporation Name

HOWARD CORP. OF WEST VOLUSIA

Principal Place of Business

Mailing Address

4328 S ATLANTIC AVE
PONCE INLET FL 32127

4328 S ATLANTIC AVE
PONCE INLET FL 32127

207-B South SPRING GARDEN (SAME)
DELAND, Florida 32720

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

01/26/1994

4. FEI Number

Applied For

59-3232005

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. 192.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 207-B South SPRING GARDEN

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 207-B

27 SAME

City & State

City & State

23 DELAND Florida

28 SAME

24 32720

25 USA

29 SAME

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECK, WILBUR
4328 S ATLANTIC AVE
PONCE INLET FL 32127

81 Name

MICHAEL MOYNIHAN

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

1600 BIG TREE RD Bld. 45

83

84 City

DAYTONA BEACH

FL

85 Zip Code

32119

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]

Signature, typed or printed name of authorized agent, and file # application

(NOTE: Registered Agent signature required when resubscribing)

3/31/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V. PRESIDENT
NAME BECK, WILBUR
STREET ADDRESS 4328 S ATLANTIC AVE
CITY ST ZIP PONCE INLET FL 32127

1.1 TITLE V. PRESIDENT ☒ Change ☐ Addition
1.2 NAME WILBUR BECK
1.3 STREET ADDRESS 4328 S. ATLANTIC AVE
1.4 CITY ST ZIP PONCE INLET FL 32127

TITLE PRESIDENT
NAME MICHAEL MOYNIHAN
STREET ADDRESS 1600 BIG TREE RD APT 45
CITY ST ZIP DAYTONA BEACH, FL. 32119

2.1 TITLE PRESIDENT ☒ Change ☐ Addition
2.2 NAME MICHAEL MOYNIHAN
2.3 STREET ADDRESS 1600 BIG TREE RD APT. 45
2.4 CITY ST ZIP DAYTONA BEACH FL. 32119

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

3.1 TITLE SECRETARY
3.2 NAME WILBUR BECK
3.3 STREET ADDRESS 4328 S. ATLANTIC - PONCE INLET FL 32127
3.4 CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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)(b), 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 or on an attachment with an address.

SIGNATURE:

[Signature]
MOYNIHAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

System Form 8