

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000007242 (8)**

1. Corporation Name

ANSPACH FIXATION DEVICES, INC.



Principal Place of Business

**4500 RIVERSIDE DR.
PALM BEACH GARDENS FL 33410**

Mailing Address

**4500 RIVERSIDE DR.
PALM BEACH GARDENS FL 33410**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/28/1994

4. FEI Number

65-0490145

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**NOWICKI, MARK J
14155 US HIGHWAY ONE, STE 302
SUITE 302
JUNO BEACH FL 33408**

10. Name and Address of New Registered Agent

81 Name

KIM A. PRINE

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

1900 Phillips Point West

83 **777 South Flagler Drive**

84 City

West Palm Beach

FL

85 Zip Code

33401-6198

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

Kim A. Prine

Signature of the person filing this statement and the corporation

(NOTE: Registered Agent signature required when reinstating)

6-9-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P
WACHTER, WILLIAM H
4500 RIVERSIDE DR.
PALM BEACH GARDENS FL 33410**

TITLE ☐ DELETE

**V
WILLIAM E. ANSPACH, III
4500 RIVERSIDE DR.
PALM BEACH GARDENS FL**

TITLE ☐ DELETE

**T
ANSPACH, THOMAS D
4500 RIVERSIDE DR.
PALM BEACH GARDENS FL 33410**

TITLE ☐ DELETE

**V/S
BEERS ELAINE K
4500 RIVERSIDE DR.
PALM BEACH GARDENS FL**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

1000002565151

06/19/98--01034--015

*****150.00**

14. I 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 *William E. Anspach* *Elaine K. Beers* *Thomas D. Anspach* *Kim A. Prine* *4-20-98*

CR2E034 (10/97)