FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000007882 (1)

1. Current Name
FTC ENTERPRISES, INC.

Principal Place of Business
P.O. BOX 570345
ORLANDO FL 32857-0345

Mailing Address
P.O. BOX 570345
ORLANDO FL 32857-0345

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/18/1994
3a. Date of Last Report:

2. Principal Place of Business
21 2678 Kendall Ave
22 Suite, Apt. # or Bldg.
23 City & State: kissimmee Fl
24 Zip: 34744
25 County: US

2a. Mailing Address
26
27 Suite, Apt. # or Bldg.
28 City & State
29 Zip
30 County

4. FEI Number: 59-3221965 ☐ 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. Does corporation owe any back taxes under s. 193.093, Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARSON, F. TAIT
7764 SNOWBERRY CIRCLE
ORLANDO FL 32869

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable): 2678 Kendall Ave
03
04 City: kissimmee FL 05 Zip Code: 34744

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: F. TAIT CARSON, President 4/27/95
(Typed or Printed Name of Individual and Capacity or Position Here) (Registered Agent Signature Required if Listed Above) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 Title	D	01 Title	☒ Change ☐ Addition
02 Name	CARSON, F. TAIT	02 Name	
03 Street Address	7764 SNOWBERRY CIRCLE	03 Street Address	2678 Kendall Ave
04 City, St, Zip	ORLANDO FL 32869	04 City, St, Zip	kissimmee Fl 34744
11 Title		11 Title	☐ Change ☐ Addition
12 Name		12 Name	
13 Street Address		13 Street Address	
14 City, St, Zip		14 City, St, Zip	
21 Title		21 Title	☐ Change ☐ Addition
22 Name		22 Name	
23 Street Address		23 Street Address	
24 City, St, Zip		24 City, St, Zip	
31 Title		31 Title	☐ Change ☐ Addition
32 Name		32 Name	
33 Street Address		33 Street Address	
34 City, St, Zip		34 City, St, Zip	
41 Title		41 Title	☐ Change ☐ Addition
42 Name		42 Name	
43 Street Address		43 Street Address	
44 City, St, Zip		44 City, St, Zip	
51 Title		51 Title	☐ Change ☐ Addition
52 Name		52 Name	
53 Street Address		53 Street Address	
54 City, St, Zip		54 City, St, Zip	
61 Title		61 Title	☐ Change ☐ Addition
62 Name		62 Name	
63 Street Address		63 Street Address	
64 City, St, Zip		64 City, St, Zip	

14. I (We) 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)(i), Florida Statutes. I further certify that the information indicated on this 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 added to the report.

SIGNATURE: F. TAIT CARSON, President 4/26/95 407 870 5475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

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