

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000008773 (1)

1. Corporation Name

FFG/ANN ARBOR, INC.



Principal Place of Business

13145 SPRING HILL DR.  
STE. G  
SPRING HILL FL 34609

Mailing Address

13145 SPRING HILL DR.  
STE. G  
SPRING HILL FL 34609

3. Date Incorporated or Qualified  
02/03/1994

3a. Date of Last Report  
08/25/1995

2. Principal Place of Business

21 13149 Spring Hill Dr.

2a. Mailing Address

26 13149 Spring Hill Dr

4. FEI Number

59-3237088

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. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

22 City & State

23 Spring Hill, Fl

27 City & State

28 Spring Hill Fl

24 34609

25 USA

29 34609

30 USA

9. Name and Address of Current Registered Agent

RYDELL, JEROME S  
5063 CUMBERLAND LANE  
SPRING HILL FL 34607

10. Name and Address of New Registered Agent

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

Jerome S Rydell

(NOTE: Registered Agent signature required with this filing)

3-11-96

DATE

12. OFFICERS AND DIRECTORS

1 D  
NAME RYDELL, JEROME S  
STREET ADDRESS 5063 CUMBERLAND LANE  
CITY-ST-ZIP SPRINGHILL FL 34607

2 S  
NAME Donna Ellison  
STREET ADDRESS 5063 Cumberland Lane  
CITY-ST-ZIP Spring Hill FL 34607

3  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

7  
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

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 supplement to 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: Jerome S. Rydell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96

DATE

352-666-7008

DAYTIME PHONE #

CR2E034 (12/95)