

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 # P94000009235 (0)

1. Corporation Name

THE TEA CART, INC.



Principal Place of Business

50 NORTHCLIFF DRIVE  
GULFBREEZE FL 32561  
US

Mailing Address

P.O. BOX 580  
GULF BREEZE FL 32562-0580  
US

3. Date Incorporated or Qualified  
01/27/1994

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3219092

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

27

City & State

24

Zip

Country

28

Zip

Country

9. Name and Address of Current Registered Agent

FRITZ, SUSAN D  
1012 PANFERIO DRIVE  
PENSACOLA FL 32561

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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, and date of signature

(If the Registered Agent Signature appears, attach heretofore

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME FRITZ, SUSAN D  
STREET ADDRESS 1012 PANFERIO DRIVE  
CITY-STATE-ZIP PENSACOLA FL

DELETE

TITLE VP  
NAME ROGGENBUCK, BESSIE B  
STREET ADDRESS 2829 BAY STREET  
CITY-STATE-ZIP GULF BREEZE FL

DELETE

TITLE ST  
NAME GARZA, MARSHA R  
STREET ADDRESS 2459 W BAYSHORE ROAD  
CITY-STATE-ZIP GULF BREEZE FL

DELETE

TITLE D  
NAME ROGGENBUCK, EDWARD O  
STREET ADDRESS 2829 BAY STREET  
CITY-STATE-ZIP GULF BREEZE FL

DELETE

TITLE D  
NAME FRITZ, BLAINE A  
STREET ADDRESS 1012 PANFERIO DR  
CITY-STATE-ZIP PENSACOLA BEACH FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

3475 W. BAYSHORE ROAD

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:

Susan D. Fritz SUSAN D. FRITZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-96

(904) 934-9992

Date

Daytime Phone #

CR2E034 (12/95)