

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 13 PM 6:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000011213 (3)

1. Corporation Name

NANCY LADELL, INC.

Principal Place of Business

139 SW 51ST TERRACE
CAPE CORAL FL 33914

Mailing Address

139 SW 51ST TERRACE
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1994

3a. Date of Last Report

2. Principal Place of Business

21 13499 U.S. 41 S.E.

2a. Mailing Address

26 13499 U.S. 41 S.E.

4. FEI Number

65-0463575

Applied For

Not Applicable

Suite, Apt. #, etc.

22 169

Suite, Apt. #, etc.

27 169

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 FT. MYERS FL.

City & State

28 FT. MYERS FL.

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 33907

25 LEE USA

29 33907

30 LEE USA

6. This corporation has liability for initial filing fee under S. 199.052,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ZIEMINSKI, NANCY
139 SW 51ST TERRACE
CAPE CORAL FL 33914

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

(Signature of agent or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when terminating)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ZIEMINSKI, NANCY
STREET ADDRESS	139 SW 51ST TERRACE
CITY, ST, ZIP	CAPE CORAL FL 33914
TITLE	DST
NAME	ZIEMINSKI, DENNIS
STREET ADDRESS	139 SW 51ST TERRACE
CITY, ST, ZIP	CAPE CORAL FL 33914
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
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	

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. 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:

Nancy Zieminski
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/95
Date

(Signature 15 days)