

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Linda B. Montagna
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

MAY - 1 1995

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000014408 (6)

1. Corporation Name:

MONTAGNARD HANDICRAFT COMPANY

Principal Place of Business:

**120 EAST MILLER STREET
SUITE 17
ORLANDO FL 32806**

Mailing Address:

**120 EAST MILLER STREET
SUITE 17
ORLANDO FL 32806**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

02/17/1994

3a. Date of Last Report

4. FIC Number

59-3235214

Applied Fee

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 advertising under 194.012,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business:

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address:

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**THOMAS, SHERRY THOMAS
120 EAST MILLER STREET
SUITE 17
ORLANDO FL 32806**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

FL

85. Zip Code

11. I, the undersigned, being a duly qualified officer or registered agent of the corporation named in this statement, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the same is true and correct to the best of my knowledge and belief.

SIGNATURE

Print Name and Title of Registered Agent

12. OFFICER AND DIRECTOR

**THOMAS, SHERRY LAPHAM
120 EAST MILLER STREET, SUITE 17
ORLANDO FL 32806**

NAME

OFFICE ADDRESS

CITY

STATE

ZIP CODE

NAME

OFFICE ADDRESS

CITY

STATE

ZIP CODE

NAME

OFFICE ADDRESS

CITY

STATE

ZIP CODE

NAME

OFFICE ADDRESS

CITY

STATE

ZIP CODE

NAME

OFFICE ADDRESS

CITY

STATE

ZIP CODE

13. ADDITIONAL OFFICERS, DIRECTORS, AND SHAREHOLDERS

14. NAME

15. OFFICE ADDRESS

16. CITY

17. STATE

18. ZIP CODE

19. NAME

20. OFFICE ADDRESS

21. CITY

22. STATE

23. ZIP CODE

24. NAME

25. OFFICE ADDRESS

26. CITY

27. STATE

28. ZIP CODE

29. NAME

30. OFFICE ADDRESS

31. CITY

32. STATE

33. ZIP CODE

34. NAME

35. OFFICE ADDRESS

36. CITY

37. STATE

38. ZIP CODE

39. NAME

40. OFFICE ADDRESS

41. CITY

42. STATE

43. ZIP CODE

SIGNATURE:

Sherry L. Thomas
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SHERRY L. THOMAS

May 4/95 (407)