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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 12 PM 9:11

DOCUMENT # **P94000022763 (4)***

1. Corporation Name
SPRING LOADED, INC.

Principal Place of Business	Mailing Address
708 COMMERCE WAY WEST BAY #9 JUPITER FL 33458	708 COMMERCE WAY WEST BAY #9 JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1011 Commerce Way	26 1011 Commerce Way
22 Suite G	27 Suite G
23 Jupiter, FL	28 Jupiter, FL
24 33458 25 Palm Bch	29 33458 30 Palm Bch

3. Date Incorporated or Qualified: 03/23/1994
3a. Date of Last Report:
4. FEI Number: 65-0476549 ☐ 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 § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KINBERGER, CHARLES R
708 COMMERCE WAY WEST
BAY #9,
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name: Charles R. Kinberger
82 Street Address (P.O. Box Number is Not Acceptable): 1011 Commerce Way
83 Suite G
84 City: Jupiter FL 85 Zip Code: 33458

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: Charles R. Kinberger 6/2/95
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE		☒ Change ☐ Addition
NAME	KINBERGER, KAREN B	12 NAME		
STREET ADDRESS	708 COMMERCE WAY WEST, #9	13 STREET ADDRESS	1011 Commerce Way, Suite G	
CITY ST ZIP	JUPITER FL 33458	14 CITY ST ZIP	Jupiter, FL 33458	
TITLE	DST	21 TITLE	D, V, S, T	☒ Change ☒ Addition
NAME	KINBERGER, CHARLES R	22 NAME		
STREET ADDRESS	708 COMMERCE WAY WEST, #9	23 STREET ADDRESS	1011 Commerce Way, Suite G	
CITY ST ZIP	JUPITER FL 33458	24 CITY ST ZIP	Jupiter, FL 33458	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 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)(i), 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: Karen B Kinberger Karen B. Kinberger 6/2/95 (407) 747-8785
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0268010 CP