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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE: Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000026735 (8) DOCUMENT #

1. Corporation Name

CONSOLIDATED POWER & MINERALS, INC.							
Principal Place	of Business	Mailing Address					/ili
1616 SOUTH 14TH STREET 1616 SOUTH 14TH STREE LEESBURG FL 34749 LEESBURG FL 34749			TREET				
					3. Date Incorporated or Qualified 04/07/1994	3a. Date of Last Report 04/28/1995	
2. Principal Pl	F: ŋ		Mailing Address		4. FEI Number	Applied For	r
Suite, Apt. #, etc.		Suite Ant # elc	Suite, Apt. #, etc.		59-3233754	Not Applica	
22 City & State		27]	27]		5. Certificate of Status Desired	See Required	اد
23		City & State	· · · · · ·		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country Zip (25 29 30)		Country	/	8. This corporation has liability for	r intangible tax under s 199.032,	
9. Name and Address of Current Registered Agent			130]	D Florida Statutes ☐ Yes K No 10. Name and Address of New Registered Agent			
			81	Name	TO, Nume and Address of New	negistered Agent	
DARNELL, W. REID				Street Add	lress (P.O. Box Number is Not Accepta	Ula)	
	OUTH 14TH STREET		82	Street Add	iress (F.O. box number is not Accepta	OIE)	
LEESBU	IRG FL 34749		83				
			84	City	14.	85 Zip Code	
11. Pursuant to or register familiar with the second secon	to the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	and 607,1508, Florida Statute la. Such change was authorizi on 607,0505. Florida Statutes	es, the above- red by the con:	l named corpo oration's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	rpose of changing its registered opontment as registered agent. I an	office n
SIGNATURE			•				
12.	Signature, typed or printer name of registered agent		OTE: Bug shared Age	at signature require		DATE	
TIFLE	OFFICERS AND	DELLIE	13.		ADDITIONS/CHANGES TO OF	ICERS AND DIRECTORS IN 12	
NAME	GREGG, F. BROWNE	<u>[</u>	1.2 NAME			Change Addition	on
STREET ADDRESS	1616 SOUTH 14TH STREET		13 STREET ADDRESS				
CITY-S1-ZIP	LEESBURG FL		1.4 D(TY-S				
TITLE	ST	DELETE	2.1 TITLE		A	Change Addition	on
NAME	DARNELL, W R		2.2 NAME				
STREET ADDRESS	1616 S 14TH STREET		23 STREE1	ADDRESS			
CITY-SI-ZIP	LEESBURG FL		2.4 CITY - S	T- ZIP			
TITLE	V EMOCO DILL	DELETE	3 1 TITLE			Change Addition	эn
NAME CARLLA ADDRESS	FINGER, BILL H 1616 S 14TH STREET		3.2 NAME				İ
STREET ADDRESS	LEESBURG FL		3.3. STREFT				
CITY-ST-ZIP TITLE	V	☐ DELETE	3.4 C·1Y-S	T-71P			
NAME	SIMPSON, III S RANDOLP		4. 1 TiTLE			Change Additio)n
STREET ADDRESS	1616 S 14TH STREET		4.2 NAME	ADDRESS			ļ
CITY-ST-ZIP	LEESBURG FL		4.3 STREET				
TITLE		DELETE	5 1 TITLE	1 - ZIP		Change [] Additio	
NAME			5.2 NAME			El cuando El Additio	"
STREET ADDRESS	xéss		5.3 STREET	ADDRESS			
CITY-ST-ZIP	•		54 CITY-S	i			
TITLE		[] DELETE	6 1 TILE			☐ Change ☐ Additio	n
NAME			6.2 NAME			E	
STREET ADDRESS			6.3 STREET	ADDRESS			}
CITY-ST-ZIP			6.4 CITY - S				İ
14. I do hereby	certify that the information supplied w	ith this filing is voluntarily furni	shed and does	not oughfulf	or the execution stated in Section 110	02/2\(0) FI = 24 O(1) FI 1 1 1 1 1 1 1 1 1	

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.

GNATURE:

While Process A Statutes and that my name of significant or pirecton process.

GNATURE:

SIGNATURE AND TYPES OR PRINTES NAME OF SIGNING OFFICER OR DIRECTOR

Lie Daytrie Process

A SUMMAN A SUM

SIGNATURE: