

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000034885 (1)

1. Corporation Name

KOO & GARRINGER, INC.

FILED

36 MAY -1 PM 3:43

SECRETARY OF STATE



Principal Place of Business

Mailing Address

3255 MEDULLA ROAD  
BUILDING 301  
LAKELAND FL 33811  
US

POB 5464  
LAKELAND FL 33807

3. Date Incorporated or Qualified  
05/03/1994

3a. Date of Last Report  
02/13/1995

4. FEI Number  
59-3239953

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 s. 199.032  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3470 Aircraft Drive

26 P.O. Box 5464

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc

23 City & State

28 City & State

24 Lakeland, FL

29 Lakeland, FL

25 Zip

26 Country

27 33811

28 USA

30 33807

31 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOO, ROBERT W.  
5658 BROOK LOOP  
LAKELAND FL 33811

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, 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 ☐ DELETE

NAME  
D KOO, ROBERT W  
STREET ADDRESS  
5658 BROOK LOOP  
CITY-ST-ZIP  
LAKELAND FL

TITLE ☐ DELETE

NAME  
D GARRINGER, LESTER G  
STREET ADDRESS  
5679 BROOK LOOP  
CITY-ST-ZIP  
LAKELAND FL 33811

TITLE ☐ DELETE

NAME  
D GARRINGER, GILBERT N  
STREET ADDRESS  
6802 CRESCENT LAKE DR  
CITY-ST-ZIP  
LAKELAND FL 33813

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

REMITTED BY MAY 1

*[Handwritten signature]*

SIGNATURE:

*[Handwritten signature]*

Lester G. Garringer

06/07/96

941

646-0030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)