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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS 96 MAY -1 PH 3: 43

1996

DOCUMENT #
1. Corporation Name

P94000034885 (1)

K00 8	R GARRINGER, INC.		SECRETARY OF STATE						
Principal Place	e of Business	Ma	a'ling Addre	ess			··	DEKN BRUDT BUNK DIBBU BEKTI UBURA DANI IDDE	
3255 MEDULLA ROAD BUILDING 301 LAKELAND FL 33811 US			POB 5464 LAKELAND	FL 3380 7			3. Date Incorporated or Qualified 3a. Date of Last Report 05/03/1994 02/13/1995		
2 Principal P	tace of Business	2a.	Mailing Ad	dress			4. FEI Number	Applied For	
347	26 P.O. Box 5464					59-3239953	59-3239953 Not Applicable		
Suite, Apt	Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional		
22		27					3. Certificate of olding systemed	Fee Required	
City & State			City & State				6. Election Campaign Financing	\$5.00 May Be	
	eland, FL	28		eland,			Trust Fund Contribution	Added to Fees	
Zip	Country	00	Zip	0.7	Country 30 IISA		This corporation has liability for the Florida Statutes	ntangible tax under s 199 032 1	
24 338	9. Name and Address of Curren	29 I Regist	338 tered Ager		30 USA	·	10. Name and Address of New Re	l	
					81	Name			
KOO, ROBERT W. 5658 BROOK LOOP LAKELAND FL 33811						Street Add	ess (P.O. Box Number is Not Acceptable)		
	AKELAND I E 33011				83			0601049003	
					84	City		85 Zip Code	
L						<u> </u>	poration submits this statement for the pe		
I office or r	to the provisions of sections bornood registered agent, or both in the State am familiar with, and accept the obligi	of Florid	la Such ch	ange was	authorized by	the corporat	ion's board of directors. I hereby accept	the appointment as registered	
SIGNATORE	Signature, typed or prints a pame of registered age			(N		ent signature requ	ired when reinstating)	[IATE	
12.	OFFICERS AN	ID DIREC	CTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change Addition	
TITLE	D			DELETE	1.1 TITLE			Change Addrsuit	
NAME	KOO, ROBERT W				12 NAME				
STREET ADDRESS	5658 BROOK LOOP					I ADDRESS			
CITY-ST-ZIP TITLE	LAKELAND FL D			DELETE	14 CITY - 5 2 1 TITLE	S1 - ZIP		Change Addition	
NAME	GARRINGER, LESTER G		استا	Decere	2 2 NAME				
STREET ADDRESS	5679 BROOK LOOP					1 ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33811				2 4 CITY -	1			
TITLE	D DANEED TE SOUTT			DELETE	3 1 TITLE	31 211		Change Addition	
NAME	GARRINGER, GILBERT N		L		3.2 NAME				
STREET ADDRESS	6802 CRESCENT LAKE DR				33STREE	FADORESS			
CITY-ST-ZIP	LAKELAND FL 33813				3.4 CiTY-	ST - ZIP			
TITLE				DELETE	4 1 TITLE			Change Addition	
NAME					4 2 NAME	İ			
STREET ADDRESS					43 STREE	T ADDRESS			
CITY-ST-ZIP					4.4 CITY -	ST-ZIP			
TITLE				DELETE	5.1 Title		And have as a second	Change Addition	
NAME					5 2 NAME		, REMITTED I	DV BRESS -	
STREET ADDRESS					5 3 STREE	T ADORESS	·	or may 1	
CITY - ST - ZIP					5 4 City -	ST - ZIP			
TITLE				DELETE	6 1 TITLE		/JU r	Change Addition	
NAME					6 2 NAME		1022/1	\mathcal{V}	
STREET ADDRESS					6 3 STREE	T ADDRESS	701161	· ·	

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)(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:	- STATUTE AND THE	OR PRINTED NAME OF SIG	Lester G.	Garringer	_06/07/96	941	646_0 <u>030</u>	
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