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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000040688 (1)**

1. Corporation Name

ROZIO & LONDON, INC.

Principal Place of Business

**6600 DUDLEY DR
NAPLES FL 33999**

Mailing Address

**6600 DUDLEY DR
NAPLES FL 33999**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country

26 State, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**RITCHIE, RONALD W
5811 PELICAN BAY BLVD
SUITE 612
NAPLES FL 33963**

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 607.0002 and 607.501, Florida Statutes, this 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 607.0002, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE
	D ROZIO, ANDREW	PO BOX 591 N/A	ESTES PARK CO 80517	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE
	D LONDON, MATTHEW	PO BOX 479 N/A	ESTES PARK CO 80517	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE

13.

1 TITLE	2 NAME	3 STREET ADDRESS	4 CITY-STATE-ZIP	5 TITLE	6 NAME	7 STREET ADDRESS	8 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ROZIO ANDREW
1071 SEAGRAPE DR
NAPLES 131 FL 33937
LONDON MATTHEW
6600 DUDLEY DR
NAPLES FL 33999

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I hereby certify that the information supplied in 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 supplementary 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 this 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 or on an additional statement.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/96

941-434-0444

CR2E034 (12/95)