

4-3-95 B-2950C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
 ANNUAL REPORT
 1995



FLORIDA DEPARTMENT OF
 STATE
 Sandra Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 APR -3 PM 5:09

DOCUMENT # P94000041799 (5)

1. Corporation Name

TARPON PLASTICS, INC.

Principal Place of Business

2336 IMMOKALEE ROAD, # 107
 NAPLES FL 33942

Mailing Address

2336 IMMOKALEE ROAD, # 107
 NAPLES FL 33942

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/06/1994** 3a. Date of Last Report

4. FEI Number **65-0496767** 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

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip Country 30

9. Name and Address of Current Registered Agent

**ASHTON, JAMES P
 1438 ARGYLE DRIVE
 FORT MYERS FL 33919**

10. Name and Address of New Registered Agent

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
 NAME **ASHTON, JAMES P**
 STREET ADDRESS **1438 ARGYLE DRIVE**
 CITY - ST - ZIP **FORT MYERS FL 33919**

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
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TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE Change Addition
 1 2 NAME
 1 3 STREET ADDRESS
 1 4 CITY - ST - ZIP

2 1 TITLE Change Addition
 2 2 NAME
 2 3 STREET ADDRESS
 2 4 CITY - ST - ZIP

3 1 TITLE Change Addition
 3 2 NAME
 3 3 STREET ADDRESS
 3 4 CITY - ST - ZIP

4 1 TITLE Change Addition
 4 2 NAME
 4 3 STREET ADDRESS
 4 4 CITY - ST - ZIP

5 1 TITLE Change Addition
 5 2 NAME
 5 3 STREET ADDRESS
 5 4 CITY - ST - ZIP

6 1 TITLE Change Addition
 6 2 NAME
 6 3 STREET ADDRESS
 6 4 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 110.07(3)(b), 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 and changed, or on an attachment with an address.

SIGNATURE:

James P. Ashton
 JAMES P. ASHTON
 V.P.

3-29-95

813-275-4545