

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000065753 (3)

1. Corporation Name

SILVER PRESS, INC.

Principal Place of Business

5770 MIDNIGHT PASS ROAD APT. #108
SARASOTA FL 34242

Mailing Address

5770 MIDNIGHT PASS ROAD APT. #108
SARASOTA FL 34242

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-0524838

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. 193 (33),
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MAGGETT, JAMES E
5770 MIDNIGHT PASS ROAD APT. #108
SARASOTA FL 34242

10. Name and Address of New Registered Agent

81 Name

MAFFETT, JAMES E.

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 in printed name of registered agent and filed as required)

(Signature typed in printed name of registered agent and filed as required)

(Signature typed in printed name of registered agent and filed as required)

12. OFFICERS AND DIRECTORS

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY, ST, ZIP

D
MAFFETT, JAMES E
5770 MIDNIGHT PASS ROAD APT. #108
SARASOTA FL 34242

11.5 TITLE

11.6 NAME

11.7 STREET ADDRESS

11.8 CITY, ST, ZIP

D
MAFFETT, EVERETT L
301 W. MAIN STREET
EATON OH 45320

11.9 TITLE

11.10 NAME

11.11 STREET ADDRESS

11.12 CITY, ST, ZIP

11.13 TITLE

11.14 NAME

11.15 STREET ADDRESS

11.16 CITY, ST, ZIP

11.17 TITLE

11.18 NAME

11.19 STREET ADDRESS

11.20 CITY, ST, ZIP

11.21 TITLE

11.22 NAME

11.23 STREET ADDRESS

11.24 CITY, ST, ZIP

11.25 TITLE

11.26 NAME

11.27 STREET ADDRESS

11.28 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

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13.33 TITLE

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13.35 STREET ADDRESS

13.36 CITY, ST, ZIP

13.37 TITLE

13.38 NAME

13.39 STREET ADDRESS

13.40 CITY, ST, ZIP

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SIGNATURE:

James E. Maffett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-95 813-753-5353