

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # P94000071833 (5)

1. Corporation Name

RELiance ENTERPRISES, INC.

SEP 11 - 11 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
2619 BISPHAM RD.
SARASOTA FL 34231

2619 BISPHAM RD.
SARASOTA FL 34231

3. Date Incorporated or Qualified 09/29/1994
3a. Date of Last Report N.A.

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country

29 Country 30 Country

4. FEI Number 65-0533342
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOUKUP, THOMAS H
2619 BISPHAM ROAD
SARASOTA FL 34231

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

(Agent or Officer or Registered Agent or Officer or Director)

(Agent or Officer or Registered Agent or Officer or Director)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PST
12 NAME SOUKUP, THOMAS H
13 STREET ADDRESS 2619 BISPHAM RD.
14 CITY, ST, ZIP SARASOTA FL 34231

11 TITLE ST
12 NAME Sharon L. Soukup
13 STREET ADDRESS 2619 Bispham Rd.
14 CITY, ST, ZIP Sarasota, FL 34231
☒ Change ☐ Addition

15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP

15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP
☐ Change ☐ Addition

19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP

19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP
☐ Change ☐ Addition

23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY, ST, ZIP

23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY, ST, ZIP
☐ Change ☐ Addition

27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY, ST, ZIP

27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY, ST, ZIP
☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in New Item 1.01(1)(7) type Florida Statutes. I further certify that the information furnished 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 or in an attachment to this filing.

SIGNATURE:

Sharon L. Soukup, Thomas H. Soukup 4/25/95 (813) 924-2650
President