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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000016582 (5)

1. Corporation Name

BOB FITCH & SONS MOVERS, INC.

Principal Place of Business

P O BOX 2286
MANGO FL 33550-2286

Mailing Address

P O BOX 2286
MANGO FL 33550-2286



3. Date Incorporated or Qualified

02/20/1995

3a. Date of Last Report

07/01/1996

4. FEI Number

59-3296759

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

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

HAYNES, CARMODY C
215 SYCAMORE LN
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name Robert Gene Fitch
82 Street Address (P.O. Box Number is Not Acceptable)
215 Sycamore Lane
83 Tampa
84 City
85 Zip Code FL 33610

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

Robert G. Fitch

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FITCH, ROBERT G
STREET ADDRESS 215 SYCAMORE LN
CITY-ST-ZIP TAMPA FL 33610-9810 ☐ DELETE

TITLE D
NAME HAYNES, JOSEPH D
STREET ADDRESS 16045 NASTURTUM DR
CITY-ST-ZIP PUNTA GORDA FL 33955 ☒ DELETE

TITLE D
NAME CARMODY-HAYNES, CARRIE J
STREET ADDRESS 215 SYCAMORE LN
CITY-ST-ZIP TAMPA FL 33610-9810 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHAIRMAN
1.2 NAME Robert Fitch
1.3 STREET ADDRESS 215 Sycamore Ln
1.4 CITY-ST-ZIP Tampa FL 33610-9810 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address.

SIGNATURE

Robert G. Fitch

President

CR2E034 (9/96)