

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000022604 (9)

1. Corporation Name

SINGLETON GROUP, INC.

Principal Place of Business

24 OAK LANE
FLAGLER BEACH FL 32136

Mailing Address

24 OAK LANE
FLAGLER BEACH FL 32136

2. Principal Place of Business

21 300 S. Central Avenue

Suite, Apt. #, etc.

22 Suite #105

City & State

23 Flagler Beach, FL

Zip

24 32136

Country

25

2a. Mailing Address

26 P.O. Box 1495

Suite, Apt. #, etc.

27

City & State

28 Flagler Beach, FL

Zip

29 32136

Country

30

3. Date Incorporated or Qualified

03/21/1995

3a. Date of Last Report

4. FEI Number

59-3302611

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

JONES, WILLIAM T III
24 OAK LANE
FLAGLER BEACH FL 32136

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 date of appointment

(NOTE: Registered Agent Signature is required when not filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SHWAN, ALFRED
STREET ADDRESS 2553 NORTH ATLANTIC AVE.
CITY-ST-ZIP DAYTONA BEACH FL 32118 ☒ DELETE

TITLE D
NAME CLARK, JANE E
STREET ADDRESS 24 OAK LANE
CITY-ST-ZIP FLAGLER BEACH FL 32136 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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 P-S-T-MD
2.3 STREET ADDRESS Jane E. Clark
2.4 CITY-ST-ZIP 24 Oak Lane
Flagler Beach, FL 32136

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 119.07(3)(k), 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: Jane E. Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96 904-439-5811
Date Date/Phone #

CR2E034 (12/95)