

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000023219 (5)

1. Corporation Name

THE ANIMATION FACTORY, INC.



Principal Place of Business

Mailing Address

8840 SW 21ST ST
MIRAMAR FL 33025

8840 SW 21ST ST
MIRAMAR FL 33025

3. Date Incorporated or Qualified

03/22/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1923 W. COPANS RD

26 1923 W. COPANS RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 POMPANO BEACH, FL

28 POMPANO BEACH, FL

Zip

Country

Zip

Country

24 33064

25 US

29 33064

30 US

4. FEI Number

65-0579082

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

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\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

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Yes

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No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, THOMAS C
8840 SW 21ST ST
MIRAMAR FL 33025

Address
Change

81 Name

THOMAS C BROWN

82 Street Address (P.O. Box Number is Not Acceptable)

1923 W. COPANS RD

83

84

POMPANO BEACH

FL

85 Zip Code

33064

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 role, if applicable

(NOTE: Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PS
STREET ADDRESS LOCKE, TERRY L
CITY-ST-ZIP % 8840 SW 21ST ST
MIRAMAR FL 33025

TITLE ☐ DELETE

NAME DV
STREET ADDRESS DANIELS, RICHARD E
CITY-ST-ZIP % 8840 SW 21ST ST
MIRAMAR FL 33025

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

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63 STREET ADDRESS

64 CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Printed

CR2E034 (3/96)