

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000032433 (1)

1. Corporation Name

FIDDLER COLLECTIONS, INC.



Principal Place of Business

Mailing Address

2722 NE 60TH LANE
OCALA FL 34479

2722 NE 60TH LANE
OCALA FL 34479

3. Date Incorporated or Qualified

04/21/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 PD BOX 5634

26 PD BOX 5634

4. FEI Number

59-3314393

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

23 OCALA, FL

28 OCALA, FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 34478-5634 25 MARION

29 34478-5634 30 MARION

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

WHITE, ROBIN R
2722 NE 60TH LANE
OCALA FL 34479

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 then applicable

(If Other Registered Agent signature required, attach separate statement)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME WHITE, ROBIN R
STREET ADDRESS 2722 NE 60TH LANE
CITY - ST - ZIP OCALA FL 34479

1.1 TITLE Change ☐ Addition

TITLE ☐ DELETE

NAME WHITE, MICHAEL G
STREET ADDRESS 2722 NE 60TH LANE
CITY - ST - ZIP OCALA FL 34479

1.2 NAME Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

1.3 STREET ADDRESS Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

1.4 CITY - ST - ZIP Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

2.2 NAME Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

2.3 STREET ADDRESS Change ☐ Addition

2.4 CITY - ST - ZIP Change ☐ Addition

3.1 TITLE Change ☐ Addition

3.2 NAME Change ☐ Addition

3.3 STREET ADDRESS Change ☐ Addition

3.4 CITY - ST - ZIP Change ☐ Addition

4.1 TITLE Change ☐ Addition

4.2 NAME Change ☐ Addition

4.3 STREET ADDRESS Change ☐ Addition

4.4 CITY - ST - ZIP Change ☐ Addition

5.1 TITLE Change ☐ Addition

5.2 NAME Change ☐ Addition

5.3 STREET ADDRESS Change ☐ Addition

5.4 CITY - ST - ZIP Change ☐ Addition

6.1 TITLE Change ☐ Addition

6.2 NAME Change ☐ Addition

6.3 STREET ADDRESS Change ☐ Addition

6.4 CITY - ST - ZIP Change ☐ Addition

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:

Robin R. White, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (350) 351-4533
Date Expiration Date

CR2E034 (12/95)