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May 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 # P95000038481 (4)

1. Corporation Name
C & S INDUSTRIES, INC.



Principal Place of Business
795-A MEADOWLAND DRIVE
NAPLES FL 33963

Mailing Address
795-A MEADOWLAND DRIVE
NAPLES FL 34108-2553

3. Date Incorporated or Qualified 05/10/1995	3a. Date of Last Report 07/26/1996
4. FEI Number 65-0583478	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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	29 Country
25	30

9. Name and Address of Current Registered Agent JONES, CARISA A 795-A MEADOWLAND DRIVE NAPLES FL 33963	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL 34108
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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: Carisa A. Jones Treasurer 5-1-97
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T JONES, CARISA A 795-A MEADOWLAND DRIVE NAPLES FL 33963	1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	JONES, CARISA A	1.2 NAME	ZIP 34108
STREET ADDRESS	795-A MEADOWLAND DRIVE	1.3 STREET ADDRESS	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
CITY - ST - ZIP	NAPLES FL 33963	1.4 CITY - ST - ZIP	ZIP 34108
P	JONES, STEVEN C 795-A MEADOWLAND DRIVE NAPLES FL 33963	2.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
TITLE	JONES, STEVEN C	2.2 NAME	ZIP 34108
NAME	JONES, STEVEN C	2.3 STREET ADDRESS	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS	795-A MEADOWLAND DRIVE	2.4 CITY - ST - ZIP	ZIP 34108
CITY - ST - ZIP	NAPLES FL 33963	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE		3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY - ST - ZIP	
CITY - ST - ZIP		4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE		4.2 NAME	
NAME		4.3 STREET ADDRESS	
STREET ADDRESS		4.4 CITY - ST - ZIP	
CITY - ST - ZIP		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE		5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY - ST - ZIP	
CITY - ST - ZIP		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE		6.2 NAME	
NAME		6.3 STREET ADDRESS	
STREET ADDRESS		6.4 CITY - ST - ZIP	

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: Carisa A. Jones 5-1-97 (941) 434-8853
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)