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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000039318	(7)
1. Corporation Name		

C L COUNTY INC

C.J. SCHULTZ, INC.	
Principal Place of Business	Mailing Address



2335 60TH AV BRADENTON I		2335 60TH AVENUE WES BRADENTON FL 34207	ST .		
				3. Date Incorporated or Qualified 05/17/1995	3a. Date of Last Report
2. Principal Plac	ce of Business_	2a. Mailing Address	0 12	4. FEI Number	Applied For
27 1230	12 58 62	26 /2302 >	S.R. 62	65-058327	
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	15h Fl.	City & State 28 Parcish	FL	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
213421	9 25 Manatel	Zip	Country 30 Marcia	8. This corporation has liability for Florida Statutes	s 🗹 No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New F	Registered Agent
			81 Name		
	TH AVENUE WEST		82 Street / 2 O	Address (P.O. Box Number is Not Acceptat	(alc
Braden	TON FL 34207		83		
•			84 City	a denton	FL 85 Zip Code 34205
or registere familiär with SIGNATURE	od agent, or both, in the State of Floring, and accept the obligations of, Sect	ida. Such change was authorized tion 607.0505, Florida Statutes.	by the corporation's Registered Agent signature in		-U-LIG
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	PSD	DELETE	1. 1 TITLE		Change -Addition
NAME	SCHLTZ, CLIFFORD J		1.2 NAME	SCHULTE J CL	-17-386
STREET ADDRESS	2335 60TH AVENUE WEST		1.3 STREET ADDRESS	12302 S.C. 62	34219
CITY-ST-ZIP	BRADENTON FL 34207	FT be see	1.4 CITY-ST-7IP	PARRELH FL	Change Addition
TITLE		DELETE	2. 1 TITLE		Change Madrion
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE		[] DELETE	3 1 THLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP			3.4 CHY-ST-ZIP		
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME	anne anne anne anne anne es anne	
STREET ADDRESS			4.3 STREET ADDRESS	8000018 -05/24/9601	プロング 125011
CHTY-\$1-ZIP			4.4 CITY - ST - ZIP	***225.00	
TITLE		DELFTE	5. 1 Totle	****CCJ****	☐ Change ☐ Addition
NAME			5 2 NAME		
STREE1 ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - S1 - 7IP		C) Channe C Prodition
TITLE		☐ DELETE	6. 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		£'
STREET ADDRESS			6.3 STREET ADDRESS		212
CITY-ST-ZIP	1		6.4 CHY-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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND THE FOR PHINTED NAME OF SIGNAND OFFICER OF DIRECTOR

5-1-96 941-776-163