

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000046722 (1)**

1. Corporation Name

COUNTRY PINE CLASSICS, INC.



Principal Place of Business

**2051 TRADE CENTER WAY
NAPLES FL 33942**

Mailing Address

**2051 TRADE CENTER WAY
NAPLES FL 33942**

3. Date Incorporated or Qualified
06/08/1995

3a. Date of Last Report

4. FEL Number

65-0597425

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

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BOLGAN, CUNEY
2501 TRADE CENTER WAY
NAPLES FL 33942**

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 607.0732 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 607.0704, Florida Statutes.

SIGNATURE

12. Signature of Registered Agent

Date:

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

**D
BOLGAN, CUNEY
2501 TRADE CENTER WAY
NAPLES FL 33942**

DELETE

1. TITLE

Change Addition

2. NAME

2. NAME

3. STREET ADDRESS

3. STREET ADDRESS

4. CITY, ST, ZIP

4. CITY, ST, ZIP

5. TITLE

DELETE

5. TITLE

Change Addition

6. NAME

6. NAME

7. STREET ADDRESS

7. STREET ADDRESS

8. CITY, ST, ZIP

8. CITY, ST, ZIP

9. TITLE

DELETE

9. TITLE

Change Addition

10. NAME

10. NAME

11. STREET ADDRESS

11. STREET ADDRESS

12. CITY, ST, ZIP

12. CITY, ST, ZIP

13. TITLE

DELETE

13. TITLE

Change Addition

14. NAME

14. NAME

15. STREET ADDRESS

15. STREET ADDRESS

16. CITY, ST, ZIP

16. CITY, ST, ZIP

17. TITLE

DELETE

17. TITLE

Change Addition

18. NAME

18. NAME

19. STREET ADDRESS

19. STREET ADDRESS

20. CITY, ST, ZIP

20. CITY, ST, ZIP

21. TITLE

DELETE

21. TITLE

Change Addition

22. NAME

22. NAME

23. STREET ADDRESS

23. STREET ADDRESS

24. CITY, ST, ZIP

24. CITY, ST, ZIP

25. TITLE

DELETE

25. TITLE

Change Addition

SIGNATURE: X *Henry Bolgan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)