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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000047954 (9)

DOCUMENT # P950

LANGIE & WILLIAMS ENTERPRISES, INC.

Principal Place of Business 670 TUSCORA DRIVE WINTER SPRINGS FL 32708 Mailing Address

670 TUSCORA DRIVE WINTER SPRINGS FL 32708



							06/20/1995	1		
2. Principal Pla	ce of Business		2a. M	lailing Address			4. FEI Number			Applied For
			26	<b>├</b> -ŋ			59-33/86/3			Not Applicable
Suite, Apt. #	, etc.		27	uite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State				ity & State			Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees
Zip		Country		ib	Cour	try	8. This corporation has liability fo	r intangibl s No	e tax under s	199.032,
4	O Name at	nd Address of Curre		red Agent	1301		10. Name and Address of New	Register	ed Agent	
	9. 1101110 01	TO MAGNESS OF SAME				81 Name				
UCOND	AN LOIG						D. D. N. H. J. Market	dala)		
	ion, lois Iscora dri'	AFE.			Ì	82 Street Add	dress (P.O. Box Number is Not Accepta	me)		
	R SPRINGS I				-	B3				
AAIIA I E	n opniivo	L 32/00								
						B4 City		F	<b>85</b> 2	Zip Code
							oration submits this statement for the p	irpose of	changing its	registered office
or register familiar with	ed agent, or bo h, and accept	oth, in the State of Flor the obligations of, Sec	rida. Such c ction 607.05	nange was authoriz 505, Florida Statutes	i.	orporation s bo	and of directors. I hereby accept the ap	DAT		o agent. ram
	Signature, typed or	printed name of registered age OFFICERS A			13.	Ngan agama o raqa	ADDITIONS/CHANGES TO O	FICERS	AND DIRECT	ORS IN 12
12.	· · · · ·			DELETE	1 1 11				☐ Change	
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NAME	LAIS 1	4. Me	- • •			IVIL				
					1207	DECT ADDRESS				
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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 in made under cath; 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 attraction and interest.

SIGNATURE:

GNATUME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-359-8598

Daytime Phone