

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 # **P95000056340 (9)**

1. Corporation Name

COOK MOVING & STORAGE, INC.



Principal Place of Business

Mailing Address

~~613 TRIUMPH COURT, #7~~
~~ORLANDO, FL 32805~~

~~613 TRIUMPH COURT, #7~~
~~ORLANDO, FL 32805~~

2. Principal Place of Business
21 **613 Triumph Court**

2a. Mailing Address
26 **613 Triumph Court**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **#7**

27 **#7**

City & State

City & State

23 **Orlando, FL**

28 **Orlando, FL**

Zip

Zip

24 **32805**

29 **32805**

Country
25 **U.S.A.**

Country
30 **U.S.A.**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

07/19/1995

4. FEI Number

59-3337365

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

10. Name and Address of New Registered Agent

COOK, SHEILA

~~613 TRIUMPH COURT, #7~~

~~ORLANDO, FL 32805~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

613 Triumph Court, #7

83

84 City
Orlando

FL

85 Zip Code
32805

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 registrant agent and the corporation)

(By the Registered Agent's signature required when the change is made)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☐ Change ☒ Addition
1.2 NAME **Sheila Cook**
1.3 STREET ADDRESS **613 Triumph Court, #7**
1.4 CITY - ST - ZIP **Orlando, FL 32805**

2.1 TITLE **Vice President** ☐ Change ☒ Addition
2.2 NAME **Allen Cook**
2.3 STREET ADDRESS **613 Triumph Court, #7**
2.4 CITY - ST - ZIP **Orlando, FL 32805**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - 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 changed, or on an attachment with an address.

SIGNATURE:

Sheila Cook **SHEILA COOK**

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4/28/96 407-298-6699

DATE

Daytime Phone

CR2E034 (12/95)