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 # **P95000057909 (0)**

1. Corporation Name

SWEENEY SALES, INC.

Principal Place of Business

3317 WATERFORD DRIVE
CLEARWATER FL 34621

Mailing Address

3317 WATERFORD DRIVE
CLEARWATER FL 34621

3. Date Incorporated or Qualified: **07/26/1995**

3a. Date of Last Report:

4. FEI Number: **59-3328161** ☐ 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
21: 126 Third Ave North
22 Suite, Apt. #, etc.: Suite 207
23 City & State: Safety Harbor, FL
24 Zip: 34695 25 Country: USA

2a. Mailing Address
26: 126 Third Ave North
27 Suite, Apt. #, etc.: Suite 207
28 City & State: Safety Harbor, FL
29 Zip: 34695 30 Country: USA

9. Name and Address of Current Registered Agent

BASTIANDAVID, A
15310 AMBERLY DRIVE
SUITE 250
TAMPA FL 33647

10. Name and Address of New Registered Agent

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 607.0502 and 607.1502, 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: James O. Sweeney James D. Sweeney DATE

OFFICERS AND DIRECTORS

12.

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SWEENEY, JAMES D 3317 WATERFORD DRIVE CLEARWATER FL 34621	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAGGERTY, PAUL B 3317 WATERFORD DRIVE CLEARWATER FL 34621	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SWEENEY, MAURA A 3317 WATERFORD DRIVE CLEARWATER FL 34621	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	President Sweeney, James D. 126 Third Ave. North Suite 207 Safety Harbor, FL 34695	☒ Change ☐ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	Vice President Sweeney, Maura A. 126 Third Ave. North Suite 207 Safety Harbor, FL 34695.	☐ Change ☐ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is true and accurate. I further certify that the information indicated on this report or supplemental 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 added to the report with an address.

SIGNATURE: James O. Sweeney James D. Sweeney 3/29/96 813 791-6923
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE #