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 # 1. Corporation Name

P95000059596 (3)

ORLOC, INC.

Onlog, ING.				
Principal Place of Business	Mailing Address			THE BANK BEIGH AND AND TOKEN BOKEN AND SER
2096 ABALONE AVENUE	2036 ABALONE AVENUE			
ATLANTIC FL 32903	ATLANTIC FL 32903		Į	
			3. Date Incorporated or Qualified 08/01/1995	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2544 W. SHORES RD.	26 P.O. BOX 360	799	59-3331174	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		- 	Fee Required
City & State	City & State	π	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 MELBOURNE, FL.	28 MELBOURNE, F	Country	This corporation has liability for	
7ip Country 24 32935 25	29 32936 3	- , '		s V No
9 Name and Address of Cu		<u></u>	10. Name and Address of New	
		81 Name	TACEN DODEDT T ID	
LACEY, ROBERT I JR		82 Street Add	LACEY, ROBERT I JR tress (P.O. Box Number is Not Accepta	Ible)
2036 ABALONE AVENUE		2544	W. SHORES RD.	
INDIALANTIC FL 32903		83		
HOW WITHOUT DE OLDOO		B4 City		85 Zip Code
		MELI MELI	BOURNE	FL 32935
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the pu	urpose of changing its registered office
or registered agent, or both, in the State of familiar with, and accept the obligations of,	Florida Such chance was sutherized t	by the corporation's bo	ard of directors. I hereby accept the app	continent as registered agent. I am
		I LACEY JR	/ PRES	4-15-96
Signal ire, typed or printed name of register.	agent and tide if applicable. (NOTE: I	Registered Agent signature requi	red when reinstating)	DATE
12. OFFICERS	S AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
THE	☐ DELETE		D/P	🔁 Change 🔲 Addition
NAME LACEY, ROBERT I JR		12 NAME	LACEY, ROBERT I JR	
STREET ADDRESS 2036 ABALONE AVENU		13 STREET ADDRESS	2544 W. SHORES RD.	
CHY-ST-ZiP INDIALANTIC FL 32903			MELBOURNE, FL 32935	Change Addition
TITLE	☐ DEFEAF	2 1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	2 4 C/TY - ST - Z/P		Change Addition
TITLE		3 1 TITLE		
NAME		3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS				
CHY-ST-ZIP	DELETE	3.4 CITY - ST - 2IP 4. 1 TITLE		Change Addition
i		4.2 NAME		
NAME CHECK ADDRESS		4.3 STREET ADDRESS		
STREET ADDRESS		4.4 CITY-ST-ZIP		
CITY-S1-ZIP	DELETE	5 1 TITLE		Change Addition
NAM:	L	5 2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
City-St-ZiP		5 4 CITY - ST - ZIP		
11TLE	DELETE	6. 1 TITLE		Change Addition
NAME	-	6.2 NAME		
STHEFF ADDRESS		6.3 STREET ADDRESS		
CITY OT 21C		64 CHTY - ST - ZIP		
14. I do hereby certify that the information sup	plied with this filing is voluntarily furnish	ned and does not qualif	y for the exemption stated in Section 11	9.07(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 logal effect as it 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:

ROBERT I LACEY JR./PRES 4-15-96 Date Daytine Phone #