

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000060635 (6)

1. Corporation Name  
ZANY, INC.

Principal Place of Business  
67 S.W. 12TH WAY  
BOCA RATON F: 33486

Mailing Address  
173 CAMINO REAL WEST  
BOCA RATON FL 33432-5941

FILED

97 MAY -1 PM 2:48

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



2. Principal Place of Business  
21 173 CAMINO REAL WEST

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State  
23 BOCA RATON, FL

27 City & State

24 Zip 33432 Country USA

28 Zip Country

3. Date Incorporated or Qualified  
08/07/1995

3a. Date of Last Report  
10/09/1996

4. FEI Number  
65-0600235

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

9. Name and Address of Current Registered Agent

COYLE, PENELOPE  
67 S.W. 12TH WAY  
BOCA RATON FL 33486

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 607.1508, 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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME COYLE, PENELOPE  
STREET ADDRESS 67 SW 12TH WAY  
CITY- ST- ZIP BOCA RATON FL 33486

TITLE S  
NAME MEYER, SUSAN L  
STREET ADDRESS 67 SW 12TH WAY  
CITY- ST- ZIP BOCA RATON FL 33486

TITLE T  
NAME MEYER, SCOTT  
STREET ADDRESS 67 SW 12TH WAY  
CITY- ST- ZIP BOCA RATON FL 33486

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP  
400002162434--7  
-05/01/97--01105--002

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP  
\*\*\*165.00

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

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

PENELOPE COYLE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)