

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

1996 AUG 28 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P95000067306 (7)

1. Corporation Name

GOLFAIR INDUSTRIAL, INC.

Principal Place of Business

Mailing Address

140 W MONROE STREET
JACKSONVILLE FL 32202

140 W MONROE STREET
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified
08/31/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-3363843

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

10. Name and Address of New Registered Agent

VAN WINKEL, ROBERT J
140 W MONROE STREET
JACKSONVILLE FL 32202

81 Name
KIRSCHNER MAIN, GRAHAM TANNER + DEMONT
82 Street Address (P.O. Box Number is Not Acceptable)
ONE INDEPENDENT DRIVE, SUITE 2000
83 City
JACKSONVILLE
84 State
FL
85 Zip Code
32202

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

Robert J. Knight

Robert J. Knight, Vice President

8/27/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
VAN WINKEL, ROBERT J
140 W MONROE STREET
JACKSONVILLE FL 32202

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
300001939303
-09/05/95--01025--005
****225.00 ****225.00

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
VD
MARTIN PETRIE
140 W MONROE ST
JACKSONVILLE FL 32202

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
STD
CHARLES GAUDRY
140 W. MONROE ST
JACKSONVILLE FL 32202

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
D.
ROBERT KNIGHT
140 W. MONROE ST
JACKSONVILLE FL 32202

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
D
ROBERT KNIGHT
140 W. MONROE ST
JACKSONVILLE FL 32202

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
☐ Change ☒ Addition
Robert M. Knight

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert M. Knight
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director

8/21/96

(904) 358-8804

CR2E034 (3/96)