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PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000085446 (9)

1. Corporation Name

JACK TROWBRIDGE & ASSOCIATES, INC.



Principal Place of Business

8344 ALOHA RD
FT MYERS FL 33912

Mailing Address

8344 ALOHA RD
FT MYERS FL 33912

3. Date Incorporated or Qualified

11/06/1995

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TROWBRIDGE, JACK L
8344 ALOHA RD
FT MYERS FL 33912

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, if not applicable

(Block 13 signature required when re-signing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

PD
TROWBRIDGE, JACK L
8344 ALOHA RD
FT MYERS FL 33912

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

VD
STRAIGHT, RICHARD
18672 TANGARINE RD
FT MYERS FL 33912

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

STD
STRAIGHT, RONALD E
17396 ALLENTOWN RD
FT MYERS FL 33912

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

VD
STRAIGHT, RICHARD
6777 WINKLER RD, G216
FT MYERS FL 33919

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

Board Member
Trowbridge, Patricia L.
8344 Aloha RD
Ft Myers FL 33912

☐ Change ☒ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 1996 (941)454-3367

CR2E034 (12/95)