

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000087326 (1)

1. Corporation Name

FOOTPRINTS INVESTIGATIONS, INC.



Principal Place of Business

5385C RIVERFRONT DR
BRADENTON FL 34208

Mailing Address

5385C RIVERFRONT DR
BRADENTON FL 34208

3. Date Incorporated or Qualified

11/14/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

650625662

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

24

25

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALL, RICHARD D
5385C RIVERFRONT DR
BRADENTON FL 34208

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 607.0632 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 607.0605, Florida Statutes.

SIGNATURE

Signature of person or persons registered agent and the corporation

Signature of Registered Agent (Signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME HALL, RICHARD D
STREET ADDRESS 5385C RIVERFRONT DR
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ DELETE

D
NAME HALL, EARLYN D
STREET ADDRESS 5385C RIVERFRONT DR
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

D/P
NAME HALL, RICHARD D
STREET ADDRESS 5385C Riverfront Dr
CITY-ST-ZIP Bradenton FL 34208

☒ Change ☐ Addition

D/T
NAME HALL, EARLYN D
STREET ADDRESS 5385C Riverfront Dr.
CITY-ST-ZIP Bradenton FL 34208

☐ Change ☒ Addition

D/VP
NAME MORRISON, JAMES R
STREET ADDRESS 5930 102 Ave N.
CITY-ST-ZIP Pinellas Park FL 34666

☐ Change ☒ Addition

D/S
NAME MORRISON, MARY L.
STREET ADDRESS 5930 102 Ave N.
CITY-ST-ZIP Pinellas Park FL 34666

☐ Change ☐ Addition

☐ 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 or person 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

4-29-96 941-748-6098

Date Daytime Phone #

CR2E034 (12/95)