

**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 # **P95000089960 (5)**

1. Corporation Name

**EASTERN FLORIDA COOLERS INC.**



Principal Place of Business

Mailing Address

PHILLIP MCHUGH  
10725 S. OCEAN BLVD.  
JENSEN BEACH FL 34957

PHILLIP MCHUGH  
10725 S. OCEAN BLVD.  
JENSEN BEACH FL 34957

3. Date Incorporated or Qualified  
**11/22/1995**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **3290 NE INDIAN RIVER DR**

26 **3290 NE INDIAN RIVER DR**

4. FEI Number  
**650-62-7526**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

City & State

23 **JENSEN BEACH, FL.**

City & State

28 **JENSEN BEACH, FL**

6. Election Campaign Financing Trust Fund Contribution

**\$5.00 May Be Added to Fees**

Zip  
24 **34957**

Country  
25 **U.S.A.**

Zip  
29 **34957**

Country  
30 **U.S.A.**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

81 Name  
**PALLINE MCHUGH**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**10725 S. OCEAN DR.**  
83 **LOT 152**  
84 City  
**JENSEN BEACH, FL**  
85 Zip Code  
**34957**

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 607.0509, Florida Statutes.

SIGNATURE

*Pamela G. McHugh* Director of Marketing

*April 25, 1996*

Signature, typed or printed name of registered agent and title (application)

(NOTE: Registered agent signature required with reinstating application)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PRES.	FRANK CASARELLA	1424 NEWMAN AVE.	SEERKONK, MA. 02771	<input type="checkbox"/>
VICE PRES + TREASURER	RAYMOND GEORGE JR.	180 READ STREET	SEERKONK, MA. 02771	<input type="checkbox"/>
SECRETARY	PHILIP T. MCHUGH	10725 S. OCEAN DR LOT 152	JENSEN BEACH, FL 34957	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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: *Philip T. McHugh*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4-23-96** Daytime Phone #: **407-334-3357**

CR2E034 (12/95)