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

PROFIT CORPORATION

oath; that I am an officer or dire-appears in Block 12 or Block 13

SIGNATURE:



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

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ANNUAL REPOR

1996

P95000093648 (0) **DOCUMENT #** DEBORAH L. VANCE & COMPANY INC Principal Place of Business Malling Address 1618 GREEN CRICKET CT. 1616 GREEN CRICKET CT. APOPKA FL 32712 APOPKA FL 32712 3. Date Incorporated or Qualified 3a. Date of Last Report 12/01/1995 2a. Mailing Address 4. FET Number Applied For 2. Principal Place of Business Not Applicable 21 26 \$8.75 Additional Suite. Apt. #. etc Suite, Apt. #. etc 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country 8. This corporation has liability for intaggible tax under s. 199.032, Zφ Country Zιρ Florida Statutes ☐ Yes Mo 24 30 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name VANCE, LAWRENCE T Street Address (P.O. Box Number is Not Acceptable) 82 1616 GREEN CRICKET CT. 83 APOPKA FL 32712 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation seb-mts 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. Theraby accept the appointment as registered agent. Florida Statutes. SIGNATURE INCOR Fragistered Agent suppliere Signal incluyees or protectious conferences agost and title diapoints of CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition TITLE 1 1 Till E VANCE, DEBORAH L 1.2 NAME NAME 1616 GREEN CRICKET CT. STREET ADDRESS 1.3 STREET ADORESS APOPKA FL 32712 1.4 CITY -ST. ZIP CITY: ST. ZIP Addition DELETE ☐ Chance 2 1 TITLE VANCE, LAWRENCE T NAME 2.2 NAME 1616 GREEN CRICKET CT. 2.3 STREET ADDRESS STREET ADDRESS APOPKA FL 32712 CITY-ST-ZIP 2.4 City - \$1 - ZiP ☐ DELETE 3 1 TiTt E ☐ Change Addition TIFLE 3.2 NAME NAME 3.3 STREET ALCORESS STREET ADDRESS CITY-ST-ZIP 3.4 CiTy - S1 - ZiF DELETE Change Addition 4 1 T TLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4.001 y - \$1 - 21P CITY-ST-ZIP CT DELETE 5.1 bitt Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS DITY-ST-ZIP 54 Offy St ZP DELETE Addition TITLE 6-1 II*LE Change | NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CDY - ST - 712 C:TY-ST-7.P 14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not quarify for the exemption shated 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 drive or 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 12 or Block 13 if chapted or or an attachment with a address.