

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 # P95000094511 (9)

1. Corporation Name
FTLSOA, INC.



Principal Place of Business

5200 TOWN CENTER CIRCLE
SUITE 301
BOCA RATON FL 33486

Mailing Address

5200 TOWN CENTER CIRCLE
SUITE 301
BOCA RATON FL 33486

3. Date Incorporated or Qualified
12/13/1995

3a. Date of Last Report

2. Principal Place of Business

21 910 GREENSWARD LA

2a. Mailing Address

26 910 GREENSWARD LA

4. FEI Number

copy of APPLICATION ☒ Applied For
☐ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 DELRAY BEACH FL

27 City & State

28 DELRAY BEACH FL

24 Zip

33445

25 Country

USA

29 Zip

33445

30 Country

USA

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

GRANET, LLOYD ESO
5200 TOWN CENTER CIRCLE
SUITE 301
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name

GEORGE H. BANE

82 Street Address (P.O. Box Number is Not Acceptable)

910 GREENSWARD LANE

83

84 City
DELRAY BEACH

FL

85 Zip Code
33445

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

George H. Bane

(NOTE: Registered Agent signature required when re-registering)

03-18-96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D BANE, GEORGE H
STREET ADDRESS 910 GREENSWARD LANE
CITY-ST-ZIP DELRAY BEACH FL 33445-9021

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT - TREASURER ☐ Change ☒ Addition
1.2 NAME GEORGE H. BANE
1.3 STREET ADDRESS 910 GREENSWARD LANE
1.4 CITY-ST-ZIP DELRAY BEACH, FL 33445

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

George H. Bane
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-18-96 407-498-2572
Date Daytime Phone #

CR2E034 (12/95)