## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P96000039366 (5)

LONGWOOD TOPICAL STAMPS, INC.

## **FILED** Apr 27 1998 8:00am Secretary of State



						<u> </u>		
Principal Place of Business Mailing Address						1 19011001 150 10(10 ditti calif abiti abiti abiti abiti		114 6111 1601
	T RIDGE COURT	2525 THICKET RIDGE COURT LONGWOOD FL 32779						
LONGWOOD	FL 32779					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						05/06/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ar	plied For
21		26				59-3381270	No	ot Applicable
Suite, Apt.	#, etc.	Suile, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	
22		27						equired
City & State	6	City & State				6. Election Campaign Financing	\$5.00	, ,
Zip	Country	710	Cour	ntry		Trust Fund Contribution	Added	
			30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	25 Name and Address of Current	29 Registered Agent	1301			10. Name and Address of New Registered		
90	HINDLER, WILLIAM V			81	Name		<u> </u>	
	25 THICKET RIDGE COURT		1	82	Ch h A - l - l - l	(D.O. Barrillianta in New Assessabile)		
	NGWOOD FL 32779				Street Address (P.O. Box Number is Not Acceptable)			
-	114110051202110		İ	83				
			ļ	0.4	0.4		as Zim	<u> </u>
				84	City	FL	<b>85</b>   Zip	Code
•	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligation.	and 607.1508, Florida Stat f Florida. Such change wa ions of, Section 607.0505,	tutes, the at s authorized Florida Stati	oove- d by t utes	-named corpo the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing it ointment as	is registered registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (N	IO1L Registered	i Ageni	it signature require	ed when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	R\$ IN 12
TITLE	P	☐ DELETE	1.1 10	LE			Change	Addition
NAME	SCHINDLER, WILLIAM V		1,2 NA	ME				
STREET ADDRESS	2525 THICKET RIDGE COURT		1.3 \$1	REE I A	address			
CITY-ST-ZIP	LONGWOOD FL 32779		1.4 01	IY-ST	- ZIP			
TITLE	VST	☐ DELETE	DELETE 2.1 T				Change	☐ Addition
NAME	SCHINDLER, WILLIAM V		2.2 NA	ME				
STREET ADDRESS	2525 THICKET RIDGE COURT				NDDRESS	· ·		
CITY-ST-ZIP	LONGWOOD FL 32779	Drutte	2. 4 Cl		- ZIP		Change	Addition
TITLE		☐ DELETE	3.1 TIT				T CHRINE	- NOOMON
NAME			3.2 NA		DODECC			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 III		1-4Ir		Change	Addition
NAME			4. 2 N/					
STREET ADDRESS					ADORESS			
CITY-ST-ZIP			4.4 C(1					
TITLE		DELETE	5.170				Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5351	RFET A	ADDRESS			
CITY-ST-ZIP			5.4 011					
TITLE		☐ DELETE	6.1 7(1				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 \$1	REET A	ADDRESS			
CITY-ST-ZIP			6.4 CIT	IY-ST-	- 2IP			
	ertify that the information supplied with	this filing does not qualify	/ for the exe	moti	on stated in S	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the	information

Indicated on this annual report or supplied with this indicated on this annual report or supplied 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 intachment with an address.

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