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Feb 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000059250 (6)

1. Corporation Name

FORD ENTERPRISES, U.S.A., INC.



Principal Place of Business

C/O TONTEMPO PROPERTY AND TRAVEL SERVICES
6001 SANDPIPER DR
LAKELAND FL 33809

Mailing Address

C/O TONTEMPO PROPERTY AND TRAVEL SERVICES
6001 SANDPIPER DR
LAKELAND FL 33809-5667

3. Date Incorporated or Qualified

07/15/1996

3a. Date of Last Report

2. Principal Place of Business

21 C/O CONTEMPO PROPERTY

Suite, Apt. #, etc.

22 6001 SANDPIPER DR

City & State

23 LAKELAND FL

Zip

24 33809

Country

25 USA

2a. Mailing Address

26 C/O CONTEMPO PROPERTY

Suite, Apt. #, etc.

27 6001 SANDPIPER DRIVE

City & State

28 LAKELAND FL

Zip

29 33809

Country

30 USA

4. FEI Number

55-3393665

Applied For

Not Applicable

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

FORD, DAVID J

C/O TONTEMPO PROPERTY AND TRAVEL SERVICES

6001 SANDPIPER DR

LAKELAND FL 33809

10. Name and Address of New Registered Agent

81 Name

FORD DAVID J.

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

C/O CONTEMPO PROPERTY AND TRAVEL SERVICES

83

6001 SANDPIPER DRIVE

84 City

LAKELAND FL.

FL

85 Zip Code

33809

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/3/97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME FORD, DAVID J
STREET ADDRESS WEST MEAD 36 JERVIS AVE
CITY-ST-ZIP RUSTINGTON WEST SUSSEX UK

TITLE D ☐ DELETE
NAME TUCKER, PAULINE
STREET ADDRESS WEST MEAD 36 JERVIS AVE
CITY-ST-ZIP RUSTINGTON WEST SUSSEX UK

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 (D) ☒ Change ☐ Addition
1.2 NAME FORD DAVID J.
1.3 STREET ADDRESS 13916 TENNYSON DRIVE
1.4 CITY-ST-ZIP HUDSON FL. 34667

2.1 TITLE VICE-PRESIDENT (D) ☒ Change ☐ Addition
2.2 NAME FORD PAULINE R.
2.3 STREET ADDRESS 13916 TENNYSON DRIVE
2.4 CITY-ST-ZIP HUDSON FL. 34667

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/97 (813) 869 0750

Daytime Phone #

CR2E034 (9/96)