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FILED

Apr 23 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 # P96000065826 (5)

1. Corporation Name  
CLASSIC MATCH, INC.



Principal Place of Business  
400 ALTERNATE KEENE RD  
LARGO FL 34641

Mailing Address  
400 ALTERNATE KEENE RD  
LARGO FL 33771-1800

3. Date Incorporated or Qualified  
08/02/1996

3a. Date of Last Report

2. Principal Place of Business  
21 2502 Rocky Point Dr.

2a. Mailing Address  
26 2502 Rocky Point Dr

4. FEI Number  
59-3405328

Applied For  
Not Applicable

22 880

27 880

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 Tampa FL

28 Tampa FL

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 33607

25 Hillsborough

29 33607

30 Hillsborough

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

LANEY, WILLIAM  
400 ALTERNATE KEENE RD  
LARGO FL 34641

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE D  
NAME LANEY, WILLIAM A  
STREET ADDRESS 400 ALTERNATE KEENE RD  
CITY-ST-ZIP LARGO FL 34641

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President / Director ☐ Change ☒ Addition  
1.2 NAME Paula Attare  
1.3 STREET ADDRESS 1436 Bay Harbor Dr. Apt. 208  
1.4 CITY-ST-ZIP Palm Harbor FL 34685

2.1 TITLE Vice President / Director ☐ Change ☒ Addition  
2.2 NAME Arlene Shatz  
2.3 STREET ADDRESS 1436 Bay Harbor Dr. Apt. 208  
2.4 CITY-ST-ZIP Palm Harbor FL 34685

3.1 TITLE Sec/Treas Director ☒ Change ☐ Addition  
3.2 NAME William Laney  
3.3 STREET ADDRESS 400 Alt. Keene Rd.  
3.4 CITY-ST-ZIP Largo, FL 34641

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

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:

*Paula Attare* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0391124

CR2E034 (9/96)