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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # P96000098237 (6) TAYLOR WARE, INC. Mailing Address Principal Place of Business 2754 PENHALE COURT 2754 PENHALE COURT WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414-7675 3. Date Incorporated or Qualified 3a. Date of Last Report 12/02/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country Zip 8. This corporation has liability for intangible tax under 8. 199.032, Yes 🔏 No 24 25 29 30 Florida Statutes 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SEARCY, JAMES W 2754 PENHALE COURT 82 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33414** 83 84 City Zip Code 85 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 m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. sature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) Change Addition LIL DELETE 1.1 TITLE SEARCY, JAMES W 1.2 NAME NAME 2754 PENHALE COURT STREET ACCORESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY - ST. 26 1.4 CITY-ST-ZIP DELETE Change Addition THEF 21 TITLE NAM: 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS C-TY+ST- ZiP 2.4 CITY - ST - ZIP DELETE Addition 3.1 TITLE Change TILLE 3.2 NAME MAME STREET ADORESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CHY-ST-28 DELETE 41 TITLE Change ☐ Addition TITLE 4.2 NAME NAMi 4.3 STREET ADDRESS STREET ADDRESS 011Y-\$1, Z# 4.4 CITY-ST-ZIP DELETE Change Addition 100 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREFT ADDRESS** 5.4 CITY-ST-ZIP CHY-SI-ZIP □ DELETE ☐ Change Addition THEF 6.1 TITLE NAME 6.2 NAME STHEE: ACCRESS **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

FILED

Apr 30 1997 8:00am

Secretary of State