

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S03849 (4)

1. Corporation Name

DALE C. ROSSMAN CONTROLS, INC.



Principal Place of Business

**P.O. BOX 1021
2160 S.R. 37 S.
MULBERRY FL 33860**

Mailing Address

**P.O. BOX 1021
2160 S.R. 37 S.
MULBERRY FL 33860**

3. Date Incorporated or Qualified
11/01/1990

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3050407

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

24

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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

**ROSSMAN, DALE C.
P.O. BOX 1021
2061 S.R. 37 S.
MULBERRY FL 33860**

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 (that of registered agent, if that of applicant)

(If 311 Registered Agent sign the required other statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

**DP
ROSSMAN, DALE C.
6977 HAYTER DR.
LAKELAND FL**

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

**VST
JORDAN, RONALD E.
1003 CALUMET WAY
BRANDON FL**

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP ☐ Change ☐ Addition

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SIGNATURE:

Ronald E. Jordan
Ronald E. Jordan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96

941-425-4941

CR2E034 (12/95)