

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # S31952 (2)

1. Corporation Name

PHOENIX CAPITAL, INC.

Principal Place of Business

800 SARASOTA QUAY  
SARASOTA FL 34236  
US

Mailing Address

800 SARASOTA QUAY  
SARASOTA FL 34236  
US



3. Date Incorporated or Qualified

02/14/1991

3a. Date of Last Report

02/27/1995

2. Principal Place of Business

2a. Mailing Address

21 73 S. PALM AVE.

25 SAME.

Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 SARASOTA

28 City & State

Zip

Country

29 Zip

Country

24 FL 34236

30 FL 34236

4. FEI Number

59-3053413

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

10. Name and Address of New Registered Agent

KAGAN, EDWIN B.  
2709 ROCKY POINT DRIVE  
SUITE 102  
TAMPA FL 33607

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, 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 reappointing.)

DATE:

4-19-96

12. OFFICERS AND DIRECTORS

TITLE PS  
NAME TICHENOR, ROGER  
STREET ADDRESS 10014 N DALE MABRY #101  
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE VT  
NAME MEIER, LEE  
STREET ADDRESS 10014 N DALE MABRY #101  
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/96

941-957-1009

CR2E034 (12/95)