

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 # S35806

(6)

1. Corporation Name

MP O'CONNELL INDUSTRIES, INC.



Principal Place of Business

546 SANDY HOOK ROAD
TREASURE ISLAND FL 33706

Mailing Address

546 SANDY HOOK ROAD
TREASURE ISLAND FL 33706

3. Date Incorporated or Qualified

03/05/1991

3a. Date of Last Report

02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number

23-2164075

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

O'CONNELL, BONNIE D.
546 SANDY HOOK RD.
TREASURE ISLAND FL 33706

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 of person or persons authorized to sign this report (Last, first, initial)

(If 100% Foundation Agent signature required when registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE

NAME
O'CONNELL, M. P.
STREET ADDRESS
546 SANDY HOOK RD.
CITY- ST- ZIP
TREASURE ISLAND FL

1.1 TITLE ☐ Change ☐ Addition

2.1 TITLE ☐ DELETE

NAME
O'CONNELL, BONNIE D.
STREET ADDRESS
546 SANDY HOOK RD.
CITY- ST- ZIP
TREASURE ISLAND FL

2.1 TITLE ☐ Change ☐ Addition

3.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

4.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

5.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

6.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

7.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

7.1 TITLE ☐ Change ☐ Addition

8.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

8.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Bonnie D. O'Connell* BONNIE O'CONNELL 1-31-96 813 366 2416

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Outside Florida

CR2E034 (12/95)