

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Workman
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

DOCUMENT # S39242 (0)
1. Corporation Name
RIBBONS PLUS CORP.

55 MAY -1 AM 10:34

OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 10241 METRO PKWY.
STE. 114
FORT MYERS FL 33912
US

Mailing Address: 10241 METRO PKWY
STE. 114
FORT MYERS FL 33912
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date incorporated or qualified: 03/18/1991		3a. Date of last report: 05/01/1994	
21		26		4. FFI Number: 65-0260764		Applied For: Not Applicable	
22. State: Apt. # of:		27. State: Apt. # of:		5. Certificate of Status Desired: ☐		\$8.75 Additional Fee Required	
23. City & State:		28. City & State:		6. Election Campaign Financing: ☐		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under S. 194.032, Florida Statutes: ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GRACE, WALTER, JR. 2259 MCGREGOR BOULEVARD FORT MYERS FL 33901				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: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
NAME	PO	NAME	U.P.D.	☐ Change ☒ Addition			
NAME	ROESSNER, BARBARA S.	NAME	JENNIFER H. ROESSNER				
STREET ADDRESS	5358 FAIRFIELD WAY	STREET ADDRESS	5358 FAIRFIELD WAY				
CITY, ST, ZIP	FORT MYERS FL	CITY, ST, ZIP	FT. MYERS, FL 33919				
NAME	STD	NAME		☐ Change ☐ Addition			
NAME	ROESSNER, DONALD E.	NAME					
STREET ADDRESS	5358 FAIRFIELD WAY	STREET ADDRESS					
CITY, ST, ZIP	FORT MYERS FL	CITY, ST, ZIP					
NAME		NAME		☐ Change ☐ Addition			
NAME		NAME					
STREET ADDRESS		STREET ADDRESS					
CITY, ST, ZIP		CITY, ST, ZIP					
NAME		NAME		☐ Change ☐ Addition			
NAME		NAME					
STREET ADDRESS		STREET ADDRESS					
CITY, ST, ZIP		CITY, ST, ZIP					
NAME		NAME		☐ Change ☐ Addition			
NAME		NAME					
STREET ADDRESS		STREET ADDRESS					
CITY, ST, ZIP		CITY, ST, ZIP					

14. I, the undersigned, certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in the last paragraph, Florida Statutes. I further certify that the information indicates how the amount reported on 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 person or persons empowered to make this report as required by Chapter 127, Florida Statutes, and that my name appears on Block 12 of Block 13 changed or certain affected with an address.

SIGNATURE: *Donald E. Roessner*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DONALD E. ROESSNER, Sec/Treas

4/24/95 813-277-0056