

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



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

**DOCUMENT # S46232 (2)**

1. Corporation Name

**STRONG & COMPANY, INC.**



Principal Place of Business

Mailing Address

**3984 CHERRY APPLE CIR  
ORLANDO FL 32810**

**3984 CHERRY APPLE CIR  
ORLANDO FL 32810**

**3. Date Incorporated or Qualified  
04/15/1991**

**3a. Date of Last Report  
08/01/1995**

**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

**4. FEI Number**

**59-3061479**

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**

**STRONG, STEVEN L.  
3984 CHERRY APPLE CIR  
ORLANDO FL 32810**

**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 name of registered agent and title (if applicable)

(If not applicable, Registered Agent Signature required when renewing)

Date

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

**TITLE** **DP** ☐ DELETE  
**NAME** **STRONG, STEVEN L.**  
**STREET ADDRESS** **3984 CHERRY APPLE CIR**  
**CITY - ST - ZIP** **ORLANDO FL**

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

**TITLE** **DS** ☐ DELETE  
**NAME** **STRONG, MARY A.**  
**STREET ADDRESS** **3984 CHERRY APPLE CIR**  
**CITY - ST - ZIP** **ORLANDO FL**

**21 TITLE** ☐ Change ☐ Addition  
**22 NAME**  
**23 STREET ADDRESS**  
**24 CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**31 TITLE** ☐ Change ☐ Addition  
**32 NAME**  
**33 STREET ADDRESS**  
**34 CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**41 TITLE** ☐ Change ☐ Addition  
**42 NAME**  
**43 STREET ADDRESS**  
**44 CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**51 TITLE** ☐ Change ☐ Addition  
**52 NAME**  
**53 STREET ADDRESS**  
**54 CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**61 TITLE** ☐ Change ☐ Addition  
**62 NAME**  
**63 STREET ADDRESS**  
**64 CITY - ST - ZIP**

**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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address**

**SIGNATURE:**

*Steve Strong* **STEVE STRONG**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/12/96** **(407)299-2967**  
Date Daytime Phone

CR2E034 (3/96)