

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S48785

(7)

1. Corporation Name

VAN ALLEN ENTERPRISES, INC.

Principal Place of Business

13 BIRDIE CIRCLE
PALM HARBOR FL 34683

Mailing Address

13 BIRDIE CIRCLE
PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

04/26/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3066049

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

7. This corporation has liability for intangible tax under the
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, TINA

13 BIRDIE CIRCLE

PALM HARBOR FL 34683

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 Agent is printed name of registered agent and the address.)

(Signature of Agent is printed name of registered agent and the address.)

(Name)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

VP

SMITH, A. V.

13 BIRDIE CIRCLE

PALM HARBOR FL

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

000001482570

-05/10/95--01060--011

****200.00 ****200.00

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

5/1/95
MS

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. 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 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Signature of Officer)

0366407 CP