

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S49553** (8)

1. Corporation Name

FLORIDA ULTRASONIC TESTING, INC.



Principal Place of Business

**1800 SECOND ST
SUITE 735
SARASOTA FL 34236**

Mailing Address

**1800 SECOND ST
SUITE 735
SARASOTA FL 34236**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BENNETT, DONALD Y.
1800 SECOND ST
SUITE 735
SARASOTA FL 34236**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

04/30/1991

3a. Date of Last Report

02/27/1995

4. FEI Number

62-1476040

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

10. Name and Address of New Registered Agent

SIGNATURE

Signature of Agent or Director

Signature of Agent or Director

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

D

**HOLT, ALBERT C
3897 MACGREGOR COMMON
LIVERMORE CA**

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

D

**HOLT, EDITH HANNA
3897 MACGREGOR COMMON
LIVERMORE CA**

☐ DELETE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

☐ DELETE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

☐ DELETE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

☐ DELETE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

☐ DELETE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

☐ DELETE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

☐ DELETE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

☐ Change ☐ Addition

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

☐ Change ☐ Addition

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. 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)(g), 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 this corporation or authorized officer 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 of this report and is accompanied by an address.

SIGNATURE:

Albert C. Holt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

2/19/96
510
423-4126
Daytime Phone No.

CR2E034 (12/95)