

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 # S59128

(6)

1. Corporation Name

MALATINO & ASSOCIATES, INC.



Principal Place of Business

4415 FLA NATL DR LKLD FL  
POST OFFICE BOX #6630  
LAKELAND FL 33807-3630

Mailing Address

4415 FLA NATL DR LKLD FL  
POST OFFICE BOX #6630  
LAKELAND FL 33807-3630

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, 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

3. Date Incorporated or Qualified

06/12/1991

3a. Date of Last Report

04/10/1995

4. FEI Number

59-3068917

Applied For

Not Applicable

5. Certificate of Status Desired XXXXX

\$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

MALATINO, PHYLLIS H.  
1238 VALLEY HILL DRIVE  
LAKELAND FL 33813

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 of applicant)

(NOTE: Registered Agent's signature is required when filing this form)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DPT

☐ DELETE

NAME

MALATINO, ANTHONY M  
1238 VALLEY HILL DR  
LAKELAND FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

VPS

☐ DELETE

NAME

MALATINO, PHYLLIS H.  
1238 VALLEY HILL DR  
LAKELAND FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☐ DELETE

NAME

WATKINS, RUSSELL  
4415 FLORIDA DRIVE /PO BOX 6630 33807-6630  
LAKELAND FL 33813

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

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

SIGNATURE:

*Anthony M. Malatino*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
ANTHONY M. MALATINO

4-10-96 (941)646-2828  
Date  
Daytime Phone #

CR2E034 (12/95)