

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 # **S65067** (8)

1. Corporation Name
ZEHNER GROUP, INC.



Principal Place of Business
**1342 COLONIAL BLVD
SUITE 2
FT MYERS FL 33907
US**

Mailing Address
**1342 COLONIAL BLVD
SUITE 2
FT MYERS FL 33907
US**

3. Date Incorporated or Qualified
07/05/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0276670

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

2. Principal Place of Business
21 Suite, Apt., #, etc.
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt., #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

**ZEHNER, CLAYTON R.
1342 COLONIAL BLVD
FT MYERS FL 33919**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 the person who is the registered agent for the corporation)

(Signature of the person who is the registered agent for the corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
	D	ZEHNER, CLAYTON R.	1342 COLONIAL BLVD	☐
		FT MYERS FL		
	D	ZEHNER, DOLORES	1342 COLONIAL BLVD	☐
		FT MYERS FL		
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-STATE-ZIP	15 TITLE	16 NAME	17 STREET ADDRESS	18 CITY-STATE-ZIP	19 TITLE	20 NAME	21 STREET ADDRESS	22 CITY-STATE-ZIP	23 TITLE	24 NAME	25 STREET ADDRESS	26 CITY-STATE-ZIP	27 TITLE	28 NAME	29 STREET ADDRESS	30 CITY-STATE-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(5)(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 affidavit.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-96

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CR2E034 (12/95)