

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S89855** (8)

1. Corporation Name

WASHINGTON COURT, INC.



Principal Place of Business

**5013 BERMUDA CIR
ORLANDO FL 32808**

Mailing Address

**5013 BERMUDA CIR
ORLANDO FL 32808**

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

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

**ABRIOLA, ANTHONY V.
5013 BERMUDA CIR
ORLANDO FL 32808**

3. Date Incorporated or Qualified

10/25/1991

3a. Date of Last Report

03/06/1995

4. FEI Number

59-3092807

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

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 officer 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 person performing this action (see instructions for applicable)

NOTE: Registered Agent Signature required when registering

DATE

12.

OFFICERS AND DIRECTORS

1.1 TITLE

P

☐ DELETE

1.2 NAME

**ABRIOLA, ANTHONY
5013 BERMUDA CIR
ORLANDO FL 32808**

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1.5 TITLE

ST

☐ DELETE

1.6 NAME

**ABRIOLA, VIOLET E.
5013 BERMUDA CIR
ORLANDO FL 32808**

1.7 STREET ADDRESS

1.8 CITY-ST-ZIP

1.9 TITLE

☐ DELETE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY-ST-ZIP

1.13 TITLE

☐ DELETE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY-ST-ZIP

1.17 TITLE

☐ DELETE

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY-ST-ZIP

1.21 TITLE

☐ DELETE

1.22 NAME

1.23 STREET ADDRESS

1.24 CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1.5 TITLE

☐ Change

☐ Addition

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY-ST-ZIP

1.9 TITLE

☐ Change

☐ Addition

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY-ST-ZIP

1.13 TITLE

☐ Change

☐ Addition

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY-ST-ZIP

1.17 TITLE

☐ Change

☐ Addition

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY-ST-ZIP

1.21 TITLE

☐ Change

☐ Addition

1.22 NAME

1.23 STREET ADDRESS

1.24 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 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 V. Abriola President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 26, 1996 407-869-9200
DATE OF FILING

CR2E034 (12/95)