

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S98311 (1)

1. Corporation Name

SAYRE CORPORATION



Principal Place of Business

Mailing Address

4439-B OLD WINTER GARDEN RD
ORLANDO FL 32811
US

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ORLANDO FL 32811
US

3. Date Incorporated or Qualified 12/04/1991
3a. Date of Last Report 05/01/1995

2. Principal Place of Business 2a. Mailing Address
21 200a S. Orange Ave 26 SAME
Suite, Apt #, etc Suite, Apt #, etc
22 27
City & State City & State
23 Orlando FL 28 Orlando FL
Zip Country Zip Country
24 32806 25 USA 29 32806 30 USA

4. FEI Number NOT APPLICABLE
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAYRE, LANCE
7984 BRIDGESTONE DR
ORLANDO FL 32835

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 officer or director of corporation and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

7/3/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME SAYRE, LANCE
STREET ADDRESS 7984 BRIDGESTONE DR
CITY-ST-ZIP ORLANDO FL
☐ DELETE

11 TITLE President
12 NAME LANCE Sayre
13 STREET ADDRESS 200a S. Orange Ave
14 CITY-ST-ZIP Orlando FL 32806
☒ Change ☐ Addition

TITLE D
NAME SAYRE, JEANETTE
STREET ADDRESS 7984 BRIDGESTONE DR
CITY-ST-ZIP ORLANDO FL
☐ DELETE

21 TITLE V.P.
22 NAME Jeanette Sayre
23 STREET ADDRESS 200a S Orange Ave
24 CITY-ST-ZIP Orlando FL 32806
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
☐ 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)(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 617, 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

7/24/96

843-0075

CR2E034 (3/96)