

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 # **V01738** (6)  
1. Corporation Name

**CSM-MONENCO, INC.**



Principal Place of Business  
**14100 58TH ST. NORTH  
CLEARWATER FL 34620-0796**

Mailing Address  
**14100 58TH ST. NORTH  
CLEARWATER FL 34620-0796**

3. Date Incorporated or Qualified  
**12/24/1991**

3a. Date of Last Report  
**09/25/1995**

4. FEI Number  
**13-3639835**

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

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25 Zip

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 Zip

9. Name and Address of Current Registered Agent

**QUACKENBUSH, MICHAEL P.  
14100 58TH STREET NORTH  
CLEARWATER FL 34620-0796**

**QUACKENBUSH, MICHAEL P.**

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

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 each officer or director of the corporation and of the registered agent and of the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	BERCHENOUGH, A J	2010 WINSTON PARK DRIVE	OAKVILLE, ONTARIO	<input type="checkbox"/>
DST	QUACKENBUSH, MICHAEL P.	14100 58TH ST. NORTH	CLEARWATER FL	<input type="checkbox"/>
CD	FEENEY, J.E.	2045 STANLEY ST.	MONTREAL, QUEBEC, CAN	<input type="checkbox"/>
V	LEGAULT, G J	2010 WINSTON PARK DRIVE	OAKVILLE, ONTARIO	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

700001871987  
-06/21/96--01113--026  
\*\*\*233.75

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Michael P. Quackenbush, VP, Director, Secretary, Treasurer**

6/6/96 (813)539-1661