

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 SEP -2 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 002266 (7)

1. Corporation Name
Printcraft Printing Centers of North
Florida, Inc.

Principal Place of Business Mailing Address
3014 Horatio Street 3014 Horatio St.
Tampa, FL 33609 Tampa, FL 33609

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

12/20/1991

3a. Date of Last Report

05/01/1996

4. FEI Number

53-3105997

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

Rocker, Charles L., JR.
3014 Horatio Street
Tampa, FL 33609

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number, if applicable)

83

84 City

500002284935-5

09/04/97-01085-004

****165.00 ****165.00

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, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
Rocker, Charles L., JR.
STREET ADDRESS
2919 Santiago St.
CITY-ST-ZIP
Tampa, FL

TITLE ☐ DELETE

NAME
Godwin, Melvin E.
STREET ADDRESS
5107 Platt St.
CITY-ST-ZIP
Tampa, FL

TITLE ☐ DELETE

NAME
Lumb, Robin T.
STREET ADDRESS
4410 Blackburn Rd.
CITY-ST-ZIP
JACKSONVILLE, FL

TITLE ☐ DELETE

*NAME

STREET ADDRESS

CITY-ST-ZIP

*TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/29/97

CR2E034 (9/96)



"Darling, there's something I just have to tell you."

"I'm all ears."

"First, PrintCraft is your one-stop source
for all your printing and mailing needs."

"And the second thing?"

"You're standing on my foot!"

Graphic Design • Printing • Mailing • Database Management

8/29/97

We did not receive our
form for our annual report.
I called and spoke with
Amy Allen, she informed me
to order the form from
Dept. of Reinstatement, to
also include this letter of
explanation, with a check
for \$165.00. If I need to do
anything further please contact
me at (904) 398-0304.

Thank You,
Jinda Johnson
Bookkeeper

PRINTCRAFT

1049 KINGS AVENUE JACKSONVILLE, FLORIDA 32207
(904) 398-0304 FAX (904) 398-0103