

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V02468 (9)**  
1. Corporation Name  
**INNOVATIVE CHASSIS WORKS OF FLORIDA, INC.**



Principal Place of Business: **7727 SW 122TH ST GAINESVILLE FL 32608 US**  
Mailing Address: **7727 SW 122TH ST GAINESVILLE FL 32608 US**

3. Date Incorporated or Qualified: **01/01/1992** 3a. Date of Last Report: **06/19/1995**  
4. FEI Number: **59-3113725** 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

**HARDY, DUDLEY P.  
996 NORTH TEMPLE AVENUE  
STARKE FL 32091**

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 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 (to be completed by registered agent or registered agent in charge)

Signature (to be completed by registered agent or registered agent in charge)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	[ ] DELETE
NAME	GRIFFIS, RONALD W	
STREET ADDRESS	7725 S.W. 122ND STREET	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	D	[ ] DELETE
NAME	GRIFFIS, LILLIAN	
STREET ADDRESS	LILLIAN GRIFFIS	
CITY-ST-ZIP	7727 SW 122ND ST	
	GAINESVILLE, FL 32608-5735	
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

11 TITLE	[ ] Change [ ] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	[ ] Change [ ] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[ ] Change [ ] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[ ] Change [ ] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[ ] Change [ ] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[ ] Change [ ] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

**500001760455**  
**-03/28/96--01023--009**  
**\*\*\*200.00**

*[Signature]*  
**3-27-96**

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)(A), 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 my initials.

SIGNATURE: *Lillian E. Griffis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-96-352-495-5158  
D.A.  
Date of Filing

CR2E034 (12/95)