

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 # V06593

(0)

1. Corporation Name

MUTUAL VENDING COMPANY



Principal Place of Business

330 NORTH INGRAHAM  
LAKELAND FL 33802-0330

Mailing Address

330 NORTH INGRAHAM  
LAKELAND FL 33802-0330

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

01/01/1992

3a. Date of Last Report

05/01/1995

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

BUCK, JOSEPH S  
6324 WOODHAVEN LN  
LAKELAND FL 33813

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, typed or printed name of registered agent and tax, if applicable

(NOTE: Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
LEWIS, O. HERMAN  
STREET ADDRESS 330 N. INGRAHAM AVE.  
CITY - ST - ZIP LAKELAND FL

TITLE ☐ DELETE

NAME VD  
BUCK, JOSEPH S  
STREET ADDRESS 5324 WOODHAVEN LN  
CITY - ST - ZIP LAKELAND FL

TITLE ☐ DELETE

NAME DP  
MILLS, WILLIAM D JR  
STREET ADDRESS 5019 LAKE IN THE WOODS BLVD  
CITY - ST - ZIP LAKELAND FL

TITLE ☐ DELETE

NAME SD  
ANDREWS, BARBARA L  
STREET ADDRESS 3325 CREWS LAKE DR  
CITY - ST - ZIP LAKELAND FL

TITLE ☐ DELETE

NAME TD  
MUSALEN, ANGEL S  
STREET ADDRESS 5023 SHADY LAKE LN  
CITY - ST - ZIP LAKELAND FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. S. MUSALEN

4-17-96

941-683-4373

Date

Day and Phone #

CR2E034 (12/95)