

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR - 8 PM 2: 07

DOCUMENT # V13602 (0)
1. Corporation Name
R. W. MEISSNER AND ASSOCIATES, INCORPORATED

Principal Place of Business Mailing Address
406 BISHOP BLVD. P.O. BOX 1304
PERRY FL 32347 PERRY FL 32347
US US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/12/1992 3a. Date of Last Report 02/23/1994
4. FEI Number 59-3117630 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. 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. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
MEISSNER, STELLA P.
406 BISHOP BLVD.
PERRY FL 32347

10. Name and Address of New Registered Agent
81 Name Robert W. Meissner
82 Street Address (P.O. Box Number is Not Acceptable) 406 Bishop Blvd.
83
84 City Perry FL 85 Zip Code 32347

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 Robert W. Meissner Robert W. Meissner Vice President 3-4-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering a Secretary.) DATE

12. OFFICERS AND DIRECTORS
TITLE PT
NAME MEISSNER, STELLA P.
STREET ADDRESS 406 BISHOP BLVD.
CITY- ST- ZIP PERRY FL
TITLE VPS
NAME MEISSNER, ROBERT W.
STREET ADDRESS 406 BISHOP BOVD.
CITY- ST- ZIP PERRY FL
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert W. Meissner 3-4-95 904-584-5087
Signature and typed or printed name of signing officer on designation. (Notarization (Fees) \$