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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

Apr 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V15184

(7)

	VERSIFIED INDUSTRIES, INC	Mailing Address 214 49TH STREET WEST BRADENTON FL 34209-2							
					3. Date Incorporated or Qualified	1		eport	
9 Principal	Principal Place of Business 2a. Mailing Address				02/17/1992	04/19/1	T T		
	Finder of Eddiness	26			4. FEI Number 65-0320974			plied For t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8			3.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip	Country 25	Z ip 29	30 Co	untry	This corporation has liability for Florida Statutes	· · · · · · · · · · · · · · · · · · ·	under s.		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	legistered Ager	nt		
	ATE, MARY			81 Name					
297 50TH STREET WEST BRADENTON FL 34209				82 Street Add	Street Address (P.O. Box Number is Not Acceptable)				
BRADENTON PL 34209				83		· · · · · · · · · · · · · · · · · · ·			

				84 City		FL 85	5 Zip C	ode	
IGNATURE	Signature, typed or printed harve of registered ag	ent and little if applicable (NC		ed Agent signature requ	poration submits this statement for the ation's board of directors. I hereby acc dired when teinstating)	ept the appointn	nent as r	registered	
	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF				
i.t Me	BONNESON, RICHARD L.	L_] DELETE	1.1 7	IAME		السا	Change	☐ Addition	
REET ADDRESS				TREET ADDRESS					
TV - S1 - ZiP	BRADENTON FL			CITY-ST-ZIP					
r£	D	☐ DELETE	217				Change	Addition	
ME	BONNENSON, JANE C.		22 N	IAME					
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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 Lam 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 applicachment with an address.

SIGNATURE:

SIGNAT

6.3 STREET ADDRESS