

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # V16900

(5)

1. Corporation Name

CLAUNCH & ASSOCIATES, INC.

Principal Place of Business

9240 CYPRESS HOLLOW DRIVE
PALM BEACH GARDENS FL 33418

Mailing Address

9240 CYPRESS HOLLOW DRIVE
PALM BEACH GARDENS FL 33418-4578



2. Principal Place of Business

21 9123 N. Military Trail

Suite, Apt. #, etc.

22 Suite 104

City & State

23 Palm Bch Gdns, FL

Zip

24 33410

Country

25 Palm Bch

2a. Mailing Address

26 9123 N. Military Trail

Suite, Apt. #, etc.

27 Suite 104

City & State

28 Palm Bch Gdns, FL

Zip

29 33410

Country

30 Palm Bch

3. Date Incorporated or Qualified

02/26/1992

3a. Date of Last Report

03/21/1996

4. FEI Number

65-0315609

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

CLAUNCH, JERRY W.
9240 CYPRESS HOLLOW DRIVE
PALM BEACH GARDENS FL 33418

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

Sandra J. Claunch Sandra J. Claunch 4-29-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CLAUNCH, JERRY W.
STREET ADDRESS 9240 CYPRESS HOLLOW DRIVE
CITY-ST-ZIP PALM BCH GARDENS FL

TITLE D ☐ DELETE

NAME CLAUNCH, SANDRA J.
STREET ADDRESS 9240 CYPRESS HOLLOW DRIVE
CITY-ST-ZIP PALM BCH GARDENS 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

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.

Sandra J. Claunch

CR2E034 (9/96)