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 # **V27112** **(4)**

1. Corporation Name

DON'T TELL MOMMA, INC.

Principal Place of Business

301-B LAW EXCHANGE
24 NORTH MARKET STREET
JACKSONVILLE FL 32202

Mailing Address

301-B LAW EXCHANGE
24 NORTH MARKET STREET
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified: **04/06/1992**

3a. Date of Last Report: **04/14/1995**

4. FEI Number: **59-3128493** ☐ 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, Fla. Statutes. ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

ROHRER, RONALD E.
301-B LAW EXCHANGE
24 NORTH MARKET STREET
JACKSONVILLE FL 32202

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 Section 607.0502 and 608.4501, 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. The Corporation is aware that any false information submitted in a document to the Department of State concerning the registered office or registered agent is a violation of Section 817.155, Florida Statutes. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Date

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ROHRER, RONALD E.	
STREET ADDRESS	301-B LAW EXCHANGE	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	☐ DELETE
NAME	O'CONNOR, CHARLES E.	
STREET ADDRESS	1237 PLYMOUTH PLACE	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	☐ DELETE
NAME	ROHRER, TERENCE L.	
STREET ADDRESS	35-1502 RIVER DRIVE S.	
CITY-ST-ZIP	JERSEY CITY, NJ.	
TITLE	D	☐ DELETE
NAME	MACKEY, PETER L.	
STREET ADDRESS	35-1502 RIVER DRIVE S.	
CITY-ST-ZIP	JERSEY CITY, NJ.	
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 TITLE		☐ Change ☐ Addition
2 NAME		
3 STREET ADDRESS		
4 CITY-ST-ZIP		
2 TITLE		☐ Change ☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE		☐ Change ☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		☐ Change ☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		☐ Change ☐ Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing complies with the requirements of Section 119.07(1), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 added.

SIGNATURE: Ronald E Rohrer 4/2/96 904/356-2347

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone