

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # V35108

(2)

1. Corporation Name

TAURUS SERVICES, INC.

Principal Place of Business

3636 EXCHANGE AVE  
NAPLES FL 33942  
US

Mailing Address

26883 MCLAUGHLIN BLVD  
BONITA SPRINGS FL 33923-3846  
US



3. Date Incorporated or Qualified

05/11/1992

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

21 27407 PELICAN RIDGE CIRC.

26 27407 PELICAN RIDGE CIRC.

4. FEI Number

65-0334729

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 BONITA SPRINGS, FLORIDA

28 BONITA SPRINGS, FLORIDA

Zip

Country

Zip

Country

24 33923

25 U.S.A.

29 33923

30

9. Name and Address of Current Registered Agent

REEVES, KEITH  
26883 MCLAUGHLIN BLVD. S.W.  
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

81 Name

KEITH REEVES

82 Street Address (P.O. Box Number is Not Acceptable)

27407 PELICAN RIDGE CIRC.

83

84 City

BONITA SPRINGS

FL

85 Zip Code

33923

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 for proper filing of registered agent and fee (Applicable)

(If None) Registered Agent's signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

PTD  
REEVES, KEITH  
26883 MCLAUGHLIN BLVD.SW  
BONITA SPRINGS FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

VSD  
REEVES, SHIRLEY  
26883 MCLAUGHLIN BLVD.SW  
BONITA SPRINGS FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

71 TITLE 72 NAME 73 STREET ADDRESS 74 CITY - ST - ZIP

81 TITLE 82 NAME 83 STREET ADDRESS 84 CITY - ST - ZIP

91 TITLE 92 NAME 93 STREET ADDRESS 94 CITY - ST - ZIP

101 TITLE 102 NAME 103 STREET ADDRESS 104 CITY - ST - ZIP

111 TITLE 112 NAME 113 STREET ADDRESS 114 CITY - ST - ZIP

121 TITLE 122 NAME 123 STREET ADDRESS 124 CITY - ST - ZIP

131 TITLE 132 NAME 133 STREET ADDRESS 134 CITY - ST - ZIP

141 TITLE 142 NAME 143 STREET ADDRESS 144 CITY - ST - ZIP

151 TITLE 152 NAME 153 STREET ADDRESS 154 CITY - ST - ZIP

161 TITLE 162 NAME 163 STREET ADDRESS 164 CITY - ST - ZIP

171 TITLE 172 NAME 173 STREET ADDRESS 174 CITY - ST - ZIP

181 TITLE 182 NAME 183 STREET ADDRESS 184 CITY - ST - ZIP

191 TITLE 192 NAME 193 STREET ADDRESS 194 CITY - ST - ZIP

201 TITLE 202 NAME 203 STREET ADDRESS 204 CITY - ST - ZIP

211 TITLE 212 NAME 213 STREET ADDRESS 214 CITY - ST - ZIP

221 TITLE 222 NAME 223 STREET ADDRESS 224 CITY - ST - ZIP

231 TITLE 232 NAME 233 STREET ADDRESS 234 CITY - ST - ZIP

241 TITLE 242 NAME 243 STREET ADDRESS 244 CITY - ST - ZIP

251 TITLE 252 NAME 253 STREET ADDRESS 254 CITY - ST - ZIP

261 TITLE 262 NAME 263 STREET ADDRESS 264 CITY - ST - ZIP

271 TITLE 272 NAME 273 STREET ADDRESS 274 CITY - ST - ZIP

281 TITLE 282 NAME 283 STREET ADDRESS 284 CITY - ST - ZIP

291 TITLE 292 NAME 293 STREET ADDRESS 294 CITY - ST - ZIP

301 TITLE 302 NAME 303 STREET ADDRESS 304 CITY - ST - ZIP

311 TITLE 312 NAME 313 STREET ADDRESS 314 CITY - ST - ZIP

321 TITLE 322 NAME 323 STREET ADDRESS 324 CITY - ST - ZIP

331 TITLE 332 NAME 333 STREET ADDRESS 334 CITY - ST - ZIP

341 TITLE 342 NAME 343 STREET ADDRESS 344 CITY - ST - ZIP

351 TITLE 352 NAME 353 STREET ADDRESS 354 CITY - ST - ZIP

361 TITLE 362 NAME 363 STREET ADDRESS 364 CITY - ST - ZIP

SIGNATURE:

KEITH REEVES

6/20/96 (941) 495-0828

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)