

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

APPROVED
AND
FILED

90 MAY -1 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V38264 (0)

1. Corporation Name

SEMBLER CENTERS, INC.

Principal Place of Business

5858 CENTRAL AVENUE
ST. PETERSBURG FL 33707

Mailing Address

5858 CENTRAL AVENUE
ST. PETERSBURG FL 33707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/22/1992

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3127287

Applied For

Not Applicable

State, Apt. # etc.

State, Apt. # etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

22

27

8. This corporation has liability ☒ or intangible tax under S. 199.032,
Florida Statutes. ☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHER, CRAIG H.
5858 CENTRAL AVENUE
ST. PETERSBURG FL 33707

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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0502, Florida Statutes.

SIGNATURE

(If the corporation is a partnership, the registered agent must be a partner.)

(If the registered agent is a corporation, the registered agent must be a director.)

12

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1
NAME
STREET ADDRESS
CITY, ST, ZIP

D
SEMBLER, MELVIN F.
5858 CENTRAL AVENUE
ST. PETERSBURG FL

13.1
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

12.2
NAME
STREET ADDRESS
CITY, ST, ZIP

DSV
SEMBLER, BRENT W.
5858 CENTRAL AVENUE
ST. PETERSBURG FL

13.2
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

12.3
NAME
STREET ADDRESS
CITY, ST, ZIP

DVS
SEMBLER, GREGORY S.
5858 CENTRAL AVENUE
ST. PETERSBURG FL

13.3
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

12.4
NAME
STREET ADDRESS
CITY, ST, ZIP

DP
SHER, CRAIG H.
5858 CENTRAL AVENUE
ST. PETERSBURG FL

13.4
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

12.5
NAME
STREET ADDRESS
CITY, ST, ZIP

DVS
SHEEHAN, DENNIS M.
5858 CENTRAL AVENUE
ST. PETERSBURG FL

13.5
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

12.6
NAME
STREET ADDRESS
CITY, ST, ZIP

13.6
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this form is individually prepared and does not qualify for the exemption stated in Sections 13.01(1)(b) Florida Statutes. I further certify that the information is based on the annual report of the corporation and that the corporation shall have the same report after the filing of this report and that the corporation shall have the same report after the filing of this report and that the corporation shall have the same report after the filing of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Craig H. Sher

4/28/95

(813)584-6000