

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V39896 (8)

1. Corporation Name

ATTACHMENT SALES, INC.

Principal Place of Business

1091 SHADICK DRIVE
ORANGE CITY FL 32763
US

Mailing Address

P. O. BOX 740687
ORANGE CITY FL 32774-0687
US



2. Principal Place of Business

2b. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

EVERHART, ROGERS A.
1755 N OAK LN
ORANGE CITY FL 32763

3. Date Incorporated or Qualified
06/01/1992

3a. Date of Last Report
05/01/1995

4. FEI Number
59-3222161

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1091 Shadick Drive

83

84 City
Orange City

FL 85 Zip Code
32763

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 or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME EVERHART, ROGERS A.
STREET ADDRESS 1755 N OAK LN
CITY-ST-ZIP ORANGE CITY FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P
1.2 NAME Everhart, Rogers A
1.3 STREET ADDRESS 1091 Shadick Drive
1.4 CITY-ST-ZIP Orange City FL 32763 ☒ Change ☐ Addition

2.1 TITLE S
2.2 NAME Potter, Elizabeth Anne
2.3 STREET ADDRESS 1091 SHADICK DRIVE
2.4 CITY-ST-ZIP Orange City FL 32774-0687 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME 500001838035
4.3 STREET ADDRESS -05/24/96--01026--004
4.4 CITY-ST-ZIP ***200.00 ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME 700001838037
5.3 STREET ADDRESS -05/24/96--01026--005
5.4 CITY-ST-ZIP ***8.75 ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Elizabeth Anne Potter*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-96

Date

904/275-8213

Daytime Phone #

CR2E034 (12/95)