

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 # **V57228**

(1)

1. Corporation Name

THE CADD GROUP INC.



Principal Place of Business

**5505 N. ATLANTIC
SUITE 130
COCOA BEACH FL 32931**

Mailing Address

**5505 N. ATLANTIC
SUITE 130
COCOA BEACH FL 32931**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**VICKERS, DAVID C.
5505 N. ATLANTIC
SUITE 130
COCOA BEACH FL 32931**

3. Date Incorporated or Qualified

08/07/1992

3a. Date of Last Report

04/10/1995

4. FEI Number

59-3134326

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)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 on the bottom line of registered agent and filled if applicable

(NOTE: Registered Agent signature required when possible)

DATE

12. OFFICERS AND DIRECTORS

TITLE

V

☐ DELETE

NAME

**VICKERS, DAVID C
473 ORANGE AVENUE
MERRITT ISLAND FL**

STREET ADDRESS

CITY-ST-ZIP

TITLE

V

☐ DELETE

NAME

**ROBINSON, JOHN M
250 CHANDLER STREET
CAPE CAN FL**

STREET ADDRESS

CITY-ST-ZIP

TITLE

S

☐ DELETE

NAME

**VICKERS, DAVID C
473 ORANGE AVENUE
MERRITT ISLAND FL**

STREET ADDRESS

CITY-ST-ZIP

TITLE

T

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NAME

**ROBINSON, JOHN M
250 CHANDLER STREET
CAPE CAN FL**

STREET ADDRESS

CITY-ST-ZIP

TITLE

P

☐ DELETE

NAME

**VICKERS, LINDA A
473 ORANGE AVENUE
MERRITT ISLAND FL**

STREET ADDRESS

CITY-ST-ZIP

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