

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 28 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V60192

(4)

1. Corporation Name

PHIL MADDUX, INC.

Principal Place of Business

**259 S.W. MONTEREY ROAD
STUART FL 34994**

Mailing Address

**259 S.W. MONTEREY ROAD
STUART FL 34994**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/24/1992

3a. Date of Last Report

04/26/1994

4. FEI Number

65-0354665

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 198.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Phil Maddux, Inc

2a. Mailing Address

26 Phil Maddux, Inc

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 606 S. Camden Ave

27 606 S. Camden Ave

City & State

City & State

23 Stuart Fla. 34994

28 Stuart Fla

Zip

Country

Zip

Country

24 34994

25 USA

29 34994

30 USA

9. Name and Address of Current Registered Agent

**MADDUX, PHILLIP M.
259 S.W. MONTEREY ROAD
STUART FL 34994**

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 607.1508, 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

Phil Maddux

(NOTE: Registered Agent signature required when reappointing)

4/25/95

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MADDUX, PHIL
577 SW HIDDEN RIVER AVE
PALM CITY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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)(b), 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 recorder 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:

Phil Maddux
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95

Date

407-283-0019

(Toll-free 1-800-955-8888)