

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V 62432

1. Corporation Name

A. A Speedy Openers, Inc.
4502 CRIMSON COURT
ORLANDO, FL 32808

Principal Place of Business

Mailing Address

4502 CRIMSON CT
ORLANDO, FL
32808

(Same)

3. Date Incorporated or Qualified

9-8-92

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

4. FET Number

59-3135398

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DORIS SHATTUCK
4502 CRIMSON COURT
ORLANDO, FL 32808

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 607.1504, 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 607.0503, Florida Statutes.

SIGNATURE *Doris Shattuck*

4-29-96

Signature to be printed in block 12 or 13, whichever applies.

Signature to be printed in block 13 or 14, whichever applies.

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME President
STREET ADDRESS Doris Shattuck
CITY-STATE-ZIP 4502 CRIMSON CT
ORLANDO, FL 32808

TITLE ☐ DELETE
NAME Vice President
STREET ADDRESS Robert Reid
CITY-STATE-ZIP 113 TRAFALGAR PL
LONGWOOD, FL 32779

TITLE ☐ DELETE
NAME Vice President
STREET ADDRESS Steve Wright
CITY-STATE-ZIP 815 CROWN POINT CROSS RD
WINTER GARDEN, FL 34787

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. TITLE
15. NAME
16. STREET ADDRESS
17. CITY-STATE-ZIP

18. TITLE
19. NAME
20. STREET ADDRESS
21. CITY-STATE-ZIP

22. TITLE
23. NAME
24. STREET ADDRESS
25. CITY-STATE-ZIP

26. TITLE
27. NAME
28. STREET ADDRESS
29. CITY-STATE-ZIP

30. TITLE
31. NAME
32. STREET ADDRESS
33. CITY-STATE-ZIP

34. TITLE
35. NAME
36. STREET ADDRESS
37. CITY-STATE-ZIP

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***208.75

AS 8/1/96

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: *Doris Shattuck* DORIS SHATTUCK

4-29-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Original Filing Fee

CR2E034 (12/95)