

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V62773** (9)

1. Corporation Name

PARD, INC.

Principal Place of Business

**11201 DANKA CIRCLE NORTH
ST. PETERSBURG FL 33716**

Mailing Address

**% RON RAMSEY
11201 DANKA CIRCLE, NO.
ST. PETERSBURG FL 33716
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1992

3a. Date of Last Report

07/05/1994

4. FEI Number

59-3146707

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**

7. This corporation has liability for corporate tax under S. 1201, 1202,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt., etc.

22

City & State

23

24

2a. Mailing Address

26

P. O. Box 23827

Suite, Apt., etc.

27

ATTN: A.C. Cavallaro

City & State

28

Jacksonville, Florida

Zip

29

32241-3827

30 Duval

9. Name and Address of Current Registered Agent

**MICKLER, ROBERT O.
3000 INDEPENDENT SQUARE
JACKSONVILLE FL 32202**

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 607.0902 and 607.1108, 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 607.0905, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the corporation's officer or director)

Signature of Registered Agent (if not the corporation's officer or director)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

101 NAME	D CAVALLARO, ANGELO C.
102 STREET ADDRESS	9456 PHILLIPS HWY., #1
103 CITY, ST, ZIP	JACKSONVILLE FL
104 NAME	D RAMSEY, RONALD F.
105 STREET ADDRESS	11201 DANKA CIRCLE N
106 CITY, ST, ZIP	ST. PETERSBURG FL
107 NAME	D DOYLE, DANIEL D., JR.
108 STREET ADDRESS	11201 DANKA CIRCLE N
109 CITY, ST, ZIP	ST. PETERSBURG FL
110 NAME	
111 STREET ADDRESS	
112 CITY, ST, ZIP	
113 NAME	
114 STREET ADDRESS	
115 CITY, ST, ZIP	
116 NAME	
117 STREET ADDRESS	
118 CITY, ST, ZIP	

101 NAME		☐ Change ☐ Addition
102 NAME		
103 STREET ADDRESS		
104 CITY, ST, ZIP		
105 NAME		☐ Change ☐ Addition
106 NAME		
107 STREET ADDRESS		
108 CITY, ST, ZIP		
109 NAME		☐ Change ☐ Addition
110 NAME		
111 STREET ADDRESS		
112 CITY, ST, ZIP		
113 NAME		☐ Change ☐ Addition
114 NAME		
115 STREET ADDRESS		
116 CITY, ST, ZIP		
117 NAME		☐ Change ☐ Addition
118 NAME		
119 STREET ADDRESS		
120 CITY, ST, ZIP		

14. I 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 in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made prior only 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 both, in this report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95

(904) 363-9000

Date

Telephone Number