

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J52317** (1)

1. Corporation Name  
**CHARLES B. PINDER, INC.**



Principal Place of Business

146 E. BLUE HERON BLVD  
 RIVIERA BEACH FL 33404  
 US

Mailing Address

146 E. BLUE HERON BLVD.  
 RIVIERA BEACH FL 33404  
 US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, 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

**CURROLL, KEVIN**  
**227 SOUTH CALHOUN STREET**  
**TALLAHASSEE FL 32302**

3. Date Incorporated or Qualified  
**01/15/1987**

3a. Date of Last Report  
**01/24/1995**

4. FET Number  
**59-2744165**

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 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office, registered agent, or both, to 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 607.0509, Florida Statutes.

SIGNATURE

Signature of the person making this report for the corporation

Signature of Registered Agent, or where required, when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE

**PD**  
**PINDER, FRANKLEEN**  
**1081 BEDFORD AVE.**  
**PALM BEACH GARDENS FL**  
**TS**

DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

Change  Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

Change  Addition

5. TITLE

Change  Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

Change  Addition

9. TITLE

Change  Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

Change  Addition

13. TITLE

Change  Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

Change  Addition

17. TITLE

Change  Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

Change  Addition

21. TITLE

Change  Addition

22. NAME

23. STREET ADDRESS

24. 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 change of or on an attachment with an address.

SIGNATURE: *Chuck Pinder* **chuck PINDER**

2/26/96 407 8486001

CR2E034 (12/95)