

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 188205 (9)

1. Corporation Name
THELLIAN CO., INC.

Principal Place of Business

ONE EAST BROWARD BLVD
PO BOX 14636
FT LAUDERDALE FL 33302

Mailing Address

ONE EAST BROWARD BLVD
PO BOX 14636
FT LAUDERDALE FL 33302



2. Principal Place of Business
21. Broward Financial Center
22. 500 E. Broward Blvd., Ste 1400
23. P. O. Box 14636
24. City & State
25. Ft. Lauderdale, FL 33302
26. Mailing Address
27. 500 E. Broward Blvd.
28. P. O. Box 14636
29. City & State
30. Ft. Lauderdale, FL 33302

3. Date Incorporated or Qualified 10/03/1955
3a. Date of Last Report 03/14/1995
4. FEI Number 59-6068110
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
CRUM, JAMES M
ONE EAST BROWARD BLVD
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81. Name CRUM, JAMES M.
82. Street Address (P.O. Box Number is Not Acceptable)
83. 500 E. Broward Blvd., Suite 1400
84. P. O. Box 14636
City Ft. Lauderdale, FL 85 Zip Code 33302

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when resigning)

Twice

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	CRUM, JAMES M	ONE EAST BROWARD BLVD	FORT LAUDERDALE FL	☐
D	GARDNER, R M	500 E. BROWARD BLVD	FORT LAUDERDALE FL	☐
T	GARDNER, RUSSELL M	500 E. BROWARD BLVD	FT LAUDERDALE, FL 00000	☐
				☐
				☐
				☐

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		500 E. Broward Blvd., Suite 1400	P.O. Box 14636, Ft. Lauderdale, FL 33302	☐	☐
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
				☐	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
				☐	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
				☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
				☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition
				☐	☐

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***225.00

CR2E034 (3/96)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. M. Gardner

Treasurer
Director

6/24/96 (954) 462-2000