

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **276462** (9)

1. Corporation Name

HILLSBORO MILE TOWER, INC.



Principal Place of Business

**1280 S.W. 36TH AVENUE
SUITE 301
POMPANO BEACH FL 33069
US**

Mailing Address

**1280 S.W. 36TH AVENUE
SUITE 301
POMPANO BEACH FL 33069
US**

3. Date Incorporated or Qualified
12/13/1963

3a. Date of Last Report
03/08/1995

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

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DORIS TUTTLE
1280 S.W. 36TH AVENUE
SUITE 301
POMPANO BEACH FL 33062**

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☒ DELETE
NAME	FLANAGAN, JACK	
STREET ADDRESS	1035 HILLSBORO MILE	
CITY-ST-ZIP	POMPANO BCH, FL 00000	
TITLE	TD	☒ DELETE
NAME	FORD, RICHARD	
STREET ADDRESS	1035 HILLSBORO MILE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	SD	☐ DELETE
NAME	MORTON, MARY	
STREET ADDRESS	1035 HILLSBORO MILE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	VP	☒ DELETE
NAME	SYNDER, JOHN	
STREET ADDRESS	1035 HILLSBORO MILE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	P	☐ DELETE
NAME	MILLER, VERNON	
STREET ADDRESS	1035 HILLSBORO MILE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	D	☒ Change ☒ Addition
1.2 NAME	Mamie Petty	
1.3 STREET ADDRESS	1035 Hillsboro Mile	
1.4 CITY-ST-ZIP	Hillsboro Beach, FL 33062	
2.1 TITLE	TD	☒ Change ☐ Addition
2.2 NAME	Vernon R. Miller	
2.3 STREET ADDRESS	1035 Hillsboro Mile	
2.4 CITY-ST-ZIP	Hillsboro Beach, FL 33062	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Dennis Hall	☐ Change ☒ Addition
4.2 NAME	VP	
4.3 STREET ADDRESS	1035 Hillsboro Mile	
4.4 CITY-ST-ZIP	Hillsboro Beach, FL 33062	
5.1 TITLE	P	☐ Change ☒ Addition
5.2 NAME	Emery Larson	
5.3 STREET ADDRESS	1035 Hillsboro Mile	
5.4 CITY-ST-ZIP	Hillsboro Beach, FL 33062	
6.1 TITLE		☐ Change ☐ Addition
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)(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: *Mary E. Morton*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/96

954/969-1330

CR2E034 (12/95)