

PROFIT
CORPORATION
ANNUAL REPORT
1996



FEDERAL BUREAU OF INVESTIGATION OF STATE
 DEPARTMENT OF JUSTICE
 SECRETARY OF STATE
 DEPARTMENT OF COMMERCE

BRAME POOLE ARCHITECTS INC.



606 NE 1ST. STREET
GAINESVILLE FL 32601
US

3. Date Being Reported on Certificate 03/19/1971	3a. Date of Last Report 01/27/1995
4. FID Number 59-1348740	Applied For Not Applicable
5. Contribution Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. The contribution is being fully for interpled for under s. 190.04 Florida Statutes. ☒ Yes ☐ No	

10. Name and Address of New Registered Agent

81 Name _____

82 Street Address, P.O. Box Number, or Not Acceptable _____

83 _____

84 City _____

FL 85 Zip Code _____

11. I, the undersigned, being a duly qualified and authorized officer of the State of Illinois, hereby certify that the above named corporation exists, this statement being the purpose of checking its registered office address with the State of Illinois. I further certify that the corporation is not delinquent in the payment of its taxes, thereby accept the appearance of a registered agent of said corporation.

12.	13.
VSD	1. NAME
POOLE, PAIGE L.	2. GRADE
8601 N. W. 4TH PLACE	3. PRESENT ADDRESS
GAINESVILLE FL	4. PREVIOUS GRADE
PDT	5. PREVIOUS ADDRESS
BRAHE, WILLIAM W	6. NAME
2345 N.W. 31ST TERR.	7. PRESENT ADDRESS
GAINESVILLE FL	8. PREVIOUS GRADE
	9. PREVIOUS ADDRESS
	10. NAME
	11. PRESENT ADDRESS
	12. PREVIOUS GRADE
	13. PREVIOUS ADDRESS
	14. NAME
	15. PRESENT ADDRESS
	16. PREVIOUS GRADE
	17. PREVIOUS ADDRESS
	18. NAME
	19. PRESENT ADDRESS
	20. PREVIOUS GRADE
	21. PREVIOUS ADDRESS
	22. NAME
	23. PRESENT ADDRESS
	24. PREVIOUS GRADE
	25. PREVIOUS ADDRESS

[illegible]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 23, 1996 (352) 372-0425

CR2E034 (12/95)