

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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 4: 51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION • ANNUAL REPORT 1995

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



DOCUMENT # **H79975** (9)

1. Corporation Name:  
**1985 INVESTMENT PROGRAM INCORPORATED**

Principal Place of Business: **777 SOUTH FLAGLER DR. SUITE 500 WEST PALM BEACH FL 33401-3194**

Mailing Address: **777 SOUTH FLAGLER DR. SUITE 500 WEST PALM BEACH FL 33401-3194**

DO NOT WRITE IN THIS SPACE

3. Date first reported or qualified: **10/07/1985**

3a. Date of last report: **05/01/1994**

4. FEI Number: **59-2608798**

Applied For:  Not Applicable

5. Certificate of status (fees):  \$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 filing the tax under S 199 (2)(2), Florida Statute:  Yes  No

2. Principal Place of Business: **21**

2a. Mailing Address: **26**

22. Suite, Apt. #, etc.: **27**

23. City, State: **28**

24. Country: **25**

29. Country: **30**

9. Name and Address of Current Registered Agent:

**BEALL JR., KENNETH S.  
777 S. FLAGLER DR., SUITE 500  
PHILLIPS POINT, EAST TOWER  
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent:

81. Name:

82. Street Address (P.O. Box Number is Not Applicable):

83. City:

84. City: **FL** 85. Zip Code:

11. Pursuant to the provisions of Sections 607.05(2) and 607.14(8), Florida Statute, the above named corporation submits this statement for the purpose of changing its registered office to the address above set forth in the State of Florida. Such change was authorized by the corporation's board of directors. The entity is not the applicant as registered agent. I am authorized to sign on behalf of the corporation of Florida Statute 607.05(2), Florida Statute.

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS	
NAME	<b>D ARON, JERRY E. 777 S. FLAGLER DR., #500 WEST PALM BEACH FL</b>	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>DPT MCINTOSH, DAVID 777 S. FLAGLER DR., #500 WEST PALM BEACH FL</b>	STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY	<b>D MITRIONE, MICHAEL 777 S. FLAGLER DR., #500 WEST PALM BEACH FL</b>	CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STATE	<b>DVS BEALL, KENNETH S., JR. 777 S. FLAGLER DR. #500 WEST PALM BEACH FL</b>	STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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(1)(b), Florida Statute. I further certify that the information disclosed 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 any person or persons for the corporation or the officer or director who executed this report is required by Chapter 100, Florida Statute, and that my name appears on Block 12 or Block 13 of this report and on any statement with an address.

SIGNATURE: *David McIntosh*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR