FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000004241 (5)

FILED Apr 10 1998 8:00am Secretary of State

BRCH PROPERTIES, INC.						
Principal Place of Business Mailing Address						T TO REAL TO SEE THE PART OF THE PROPERTY OF THE PARTY OF
800 MEADOWS RD. 800 MEADOWS RD. 800A RATON FL 33486 80CA RATON FL 33486						3. Date Incorporated or Qualified 08/29/1994 4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address						59-3298309 Not Applicable 5 Codificate of Status Decised S. Setting D
21		28			5. Certificate of Status Desired	
Suite, Apt.		Suite, Apt. #, etc.			Election Campaign Financing Trust Fund Contribution Added to Fees	
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip Country			8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		B1 N	lame	10. Name and Address of New Registered Agent
LACOIDA	INV. OLIOP		Ľ	<u> </u>	iame	
	MY, SUSIE		T P	82 S	treet Addre	ss (P.O. Box Number is Not Acceptable)
800 MEADOWS RD BOCA RATON FL 33486			la la	B3		· · · ·
000/11	***************************************		l,	B4 C	ity	85 Zip Code
				. -	•	FL " " " " " " " " "
agent. I a SIGNATURE	m familiar with, and accept the oblig Signature, typed or printed name of registered ag					ration submits this statement for the purpose of changing its registered in a board of directors. I hereby accept the appointment as registered when reliabilities the properties of the purpose of changing its registered.
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITL			Change Addition
NAME	PIERCE, RANDOLPH J 800 MEADOWS RD.		1.2 NAA			•
STREET ADDRESS City-St-29P	BOCA RATON FL 33486			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	_	2.1 TITLE		☐ Change ☐ Addition
NAME	MCGIBANY, SUSIE		2.2 NAA	2.2 NAME		_ • _
STREET ADDRESS	800 MEADOWS RD.		2.3 STR	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33486	- I pri cre		2. 4 CITY-ST-ZIP		Channe [] Addition
TITLE NAME	D OSBORNE, A.E.	☐ DELETE		3.1 TITLE 3.2 NAME		L] Change L] Addition
STREET ADDRESS	800 MEADOWS RD.			3.3 STREET ADDRESS		
CATY-ST-ZIP	BOCA RATON FL 33486			Y-\$T-Z	4	
TITLE		DELETE	4.1 TITL	4.1 TITLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS			•	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITL		<u>''</u>	Change Addition
NAME		_	5.2 NAA			
STREET ADDRESS			5.3 STR	EET ADD	Dress	
CITY-ST-ZIP		·····		Y-ST-Z	IP .	
TITLE		DELETE	6.1 TITL			Change Addition
NAME .			6.2 NAA		NATAR	
STREET ADDRESS				EET ADO		
CITY-ST-ZIP	1		■ 6.4 C/M	Y-ST-Zi	r í	

1. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 If changed, or on an attachment with an address.