

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 25, 2000 8:00 am
Secretary of State

04-04-2000 90086 008 ***150.00

DOCUMENT # P95000008826

19921

1. Entity Name
BROUGHTON, INC.

Principal Place of Business
3900 9TH ST NORTH
ST. PETERSBURG FL 33703
US

Mailing Address
P O BOX 3342
ST PETERSBURG FL 33731-342
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0553751**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOULDS, GAIL F
% HARRIS BARRETT MANN & DEW
SUITE 1500, 150 SECOND AVENUE NORTH
ST. PETERSBURG FL 33701

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
PD
 NAME **BROUGHTON, JAMES E**
 STREET ADDRESS **3900 9TH ST N**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
STD
 NAME **BROUGHTON, KAY T**
 STREET ADDRESS **3900 9TH ST N.**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
V
 NAME **BROUGHTON, MARK D**
 STREET ADDRESS **3900 9TH ST N**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
V
 NAME **BROUGHTON, JAMES E JR**
 STREET ADDRESS **3900 9TH ST N**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
V
 NAME **DELUCIA, BROOKE B**
 STREET ADDRESS **3900 9TH ST N**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
V
 NAME **BROUGHTON, MATTHEW S**
 STREET ADDRESS **3900 9TH ST N**
 CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.


SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

19921 BOB 11-21-00



DO NOT WRITE IN THIS SPACE

082400

046305

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000008826

1. Entity Name
BROUGHTON, INC. 19921

| | |
|---|--|
| Principal Place of Business 3900 9TH ST NORTH ST. PETERSBURG FL 33703 US | Mailing Address P O BOX 3342 ST PETERSBURG FL 33731-3342 US |
|---|--|

Attachment to 19921



DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

| | |
|---|--|
| 4. FEI Number 65-0553751 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**MOULDS, GAIL F
% HARRIS BARRETT MANN & DEW
SUITE 1500, 150 SECOND AVENUE NORTH
ST. PETERSBURG FL 33701**

7. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *James E. Broughton* DATE 3/20/00
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 11. OFFICERS AND DIRECTORS | | <input type="checkbox"/> Delete |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BROUGHTON, JAMES E 3900 9TH ST N ST. PETERSBURG FL | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD BROUGHTON, KAY T 3900 9TH ST N. ST. PETERSBURG FL | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BROUGHTON, MARK D 3900 9TH ST N ST. PETERSBURG FL | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BROUGHTON, JAMES E JR 3900 9TH ST N ST. PETERSBURG FL | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V DELUCIA, BROOKE B 3900 9TH ST N ST. PETERSBURG FL | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BROUGHTON, MATTHEW S 3900 9TH ST N ST. PETERSBURG FL | <input type="checkbox"/> |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|---|--|---------------------------------|-----------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> | <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> | <input type="checkbox"/> |

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Date

Daytime Phone #

CR2E034 (9/99)

AUG-21-2000 17:27

BROUGHTON INT. INC.

302 658 2040 P.02

BROUGHTON INTERNATIONAL INC.
800 SOUTH MADISON STREET
WILMINGTON, DE 19801
(302) 777-7767

NATIONSBANK
OFFICIAL SPONSOR 1994/1998 U.S. OLYMPIC TEAM
NATIONSBANK OF FLORIDA, N.A.

12847

63-27/631

CHECK NO.

012847

80052

DATE

AMOUNT

03/28/00

*****150.00*

*ONE HUNDRED FIFTY DOLLARS AND NO CENTS

Department of State
Division of Corporations
Annual Reports Filings
Tallahassee FL 32302

Ma

S. Broughton

FLORIDA

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

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⑆0000015000⑆

FOR DEPOSIT ONLY

APR 04 2000

DEPARTMENT OF STATE
ACCT. #: 1009068796

2529 86455

APR - 5 01

NATIONSBANK JAX 04/06/00
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• Tactile Features

• Watermark

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