FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **129561** **(7)**

1. Corporation Name

FIRST OF FLORIDA CORPORATION

Principal Place of Business	Mailing Address
HENRY B PEACOCK JR 51 N W 1ST ST MIAMI FL 33128-1691 US	HENRY B PEACOCK JR 51 N W 1ST ST MIAMI FL 33128-1691 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/08/1934	3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-0242625	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. This corporation has activity for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 International Place, Suite	26 International Place, Suite
Suite, Apt. #, etc. 2370	Suite, Apt. #, etc. 2370
22 100 SE 2 Street	27 100 SE 2 Street
City & State	City & State
23 Miami, FL	28 Miami, FL
Zip / Country	Zip / Country
24 33131-2145 25 USA	29 33131-2145 30 USA

9. Name and Address of Current Registered Agent

PEACOCK JR,HENRY B
51 NW FIRST ST
MIAMI FL 33128

10. Name and Address of New Registered Agent

81 Name: Barbara A. Rickard
82 Street Address (P.O. Box Number is Not Acceptable): International Place, Suite 2370
83: 100 SE 2 Street
84 City: MIAMI FL 85 Zip Code: 33131-2145

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: Barbara A. Rickard Barbara A. Rickard, Sec/Treas 4/21/95
(Signature, typed or printed name of registered agent and the title of authorization) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	11 TITLE	S/T D	☒ Change ☐ Addition
NAME	RICKARD, B A	12 NAME	Barbara A. Rickard	
STREET ADDRESS	51 N W FIRST STREET	13 STREET ADDRESS	100 SE 2 Street, Suite 2370	
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP	Miami, FL 33131 2145	
TITLE	PTD	21 TITLE		☒ Change ☐ Addition
NAME	PEACKOCK, HENRY JR	22 NAME	Delete as decreased 10/30/94	
STREET ADDRESS	51 N W FIRST ST	23 STREET ADDRESS		
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP		
TITLE	VD	31 TITLE	P/D	☒ Change ☐ Addition
NAME	HEMMINGS, ARTHUR I	32 NAME		
STREET ADDRESS	2582 SW 7 CT	33 STREET ADDRESS		
CITY ST ZIP	HOMESTEAD FL	34 CITY ST ZIP	Homestead, FL 33033-5210	
TITLE		41 TITLE	V/D	☐ Change ☒ Addition
NAME		42 NAME	Samuel L. Barr, Jr.	
STREET ADDRESS		43 STREET ADDRESS	801 Brickell Avenue, 19th Floor	
CITY ST ZIP		44 CITY ST ZIP	Miami, FL 33131	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara A. Rickard Barbara A. Rickard 4/21/95 (305) 373-1386
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0206063 CP