

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 APR 10 AM 11:29

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 434845 (4)

1. Corporation Name

FPL INVESTMENTS INC.

Principal Place of Business

**ATTN: D P COYLE
1400 CENTREPARK BLVD #600
W PALM BCH FL 33401**

Mailing Address

**ATTN: D P COYLE
1400 CENTREPARK BLVD #600
W PALM BCH FL 33401**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/17/1973

3a. Date of Last Report

03/29/1994

4. FEI Number

59-1519304

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**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt., etc.

2a. Mailing Address

26 **700 Universe Blvd.**

22

City & State

27 Suite, Apt., etc.

27 **Attn: Dennis P. Coyle**

23

City & State

28

Juno Beach FL

24

Zip

Country

29

33408

Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEON, J E
9250 WEST FLAGLER ST.
MIAMI FL 33174**

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DC**
NAME **BARNA, KENNETH G.**
STREET ADDRESS **1400 CENTREPARK BLVD., #600**
CITY - ST - ZIP **WPB FL**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

MCGRATH, ROBERT L.

TITLE **DP**
NAME **GELBER, LESLIE J**
STREET ADDRESS **1400 CENTREPARK BLVD., #600**
CITY - ST - ZIP **WPB FL**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **D**
NAME **EVANSON, PAUL**
STREET ADDRESS **700 UNIVERSE BLVD.**
CITY - ST - ZIP **JUNO BCH FL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **T**
NAME **SAMIL, D.L.**
STREET ADDRESS **700 UNIVERSE BLVD**
CITY - ST - ZIP **JUNO BEACH FL**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **S**
NAME **COYLE, D P**
STREET ADDRESS **700 UNIVERSE BLVD**
CITY - ST - ZIP **JUNO BCH FL**

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE **DV**
NAME **HOFFMAN, K P**
STREET ADDRESS **1400 CENTREPARK BLVD 600**
CITY - ST - ZIP **W PALM BCH FL**

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report, 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 incorporator 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:

Dennis P. Coyle

March 15, 1995

(407) 694-4644

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

434845

FPL INVESTMENT INC

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	AS ☐ Change ☒ Addition
NAME		1.2 NAME	CARPENTER, FRANCES M.
STREET ADDRESS		1.3 STREET ADDRESS	1400 CENTREPARK BLVD. #600
CITY - ST - ZIP		1.4 CITY - ST - ZIP	WEST PALM BEACH, FL 33401
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	