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Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S00799

(4)

1. Corporation Name

ADLEY, BRISSON, ENGMAN, INC.



Principal Place of Business

1620 MAIN STREET
11
SARASOTA FL 34236
US

Mailing Address

1620 MAIN STREET
11
SARASOTA FL 34236-5824
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
09/07/1990

3a. Date of Last Report
04/17/1996

4. FEI Number

58-0958319

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

9. Name and Address of Current Registered Agent

ADLEY, HARRY C
1620 MAIN STREET, SUITE 11
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name BRISSON, Wm. F.
82 Street Address (P.O. Box Number Is Not Acceptable)
1620 MAIN ST., SUITE 11
83
84 City SARASOTA FL 85 Zip Code 34236

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

Wm. F. Brisson

Wm. F. BRISSON

4-17-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME ADLEY, HARRY C.
STREET ADDRESS 1620 MAIN ST., STE 5
CITY-ST-ZIP SARASOTA FL

TITLE V ☒ DELETE
NAME BRISSON, WM., F.
STREET ADDRESS 1620 MAIN ST., STE 5
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT ☒ Change ☐ Addition
1.2 NAME BRISSON, Wm. F.
1.3 STREET ADDRESS 1620 MAIN ST., STE. 11
1.4 CITY-ST-ZIP SARASOTA, FL 34236

2.1 TITLE VP, S ☐ Change ☒ Addition
2.2 NAME ENGMAN, EUGENE C.
2.3 STREET ADDRESS 1620 MAIN ST., STE. 11
2.4 CITY-ST-ZIP SARASOTA, FL 34236

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (9/96)