

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 194351 (3)

1. Corporation Name

BOULTON AGENCY, INC.



Principal Place of Business

Mailing Address

12000 BISCAYNE BLVD., SUITE #502  
MIAMI FL 33181-9703

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MIAMI FL 33181-9703

3. Date Incorporated or Qualified

07/05/1956

3a. Date of Last Report

06/05/1995

2. Principal Place of Business

2a. Mailing Address

21 7500 N.W. 25 Street

26 7500 N.W. 25 Street

4. FEI Number

59-0777858

Applied For

Not Applicable

22 Suite 200

27 Suite 200

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24 33122-1700

25 U.S.

29 33122-1700

30 U.S.

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PHILPOTT, ROBERT A.  
1460 NE 103 STREET  
MIAMI SHORES FL 33138

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.

Robert A. Philpott

4/16/96

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE  
NAME BOON, RAYMOND O.  
STREET ADDRESS 7605 S.W. 159TH TERR.  
CITY-STATE-ZIP MIAMI, FL

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME Philpott, Robert A.  
1.3 STREET ADDRESS 1460 N.E. 103 Street  
1.4 CITY-STATE-ZIP Miami Shores, FL. 33138

TITLE PD ☐ DELETE  
NAME PHILPOTT, ROBERT A  
STREET ADDRESS 1460 NE 103 ST.  
CITY-STATE-ZIP MIAMI SHORES FL

2.1 TITLE V ☒ Change ☐ Addition  
2.2 NAME Boon, Raymond O.  
2.3 STREET ADDRESS 7605 S.W. 159 Terr.  
2.4 CITY-STATE-ZIP Miami, FL. 33157

TITLE VPD ☐ DELETE  
NAME BOOD, RAYMOND O JR  
STREET ADDRESS 8500 SW 150TH TERR  
CITY-STATE-ZIP MIAMI FL

3.1 TITLE V/T ☒ Change ☐ Addition  
3.2 NAME Boon, Raymond O. Jr.  
3.3 STREET ADDRESS 8500 S.W. 150 Terr.  
3.4 CITY-STATE-ZIP Miami, FL. 33158

TITLE SVD ☒ DELETE  
NAME FICKLE, BRADLEY O III  
STREET ADDRESS 8325 SW 163 ST  
CITY-STATE-ZIP MIAMI FL

4.1 TITLE V/S ☒ Change ☐ Addition  
4.2 NAME Tristani, Ondina  
4.3 STREET ADDRESS 13720 S.W. 90 Ave. #H  
4.4 CITY-STATE-ZIP Miami, FL. 33176

TITLE VD ☐ DELETE  
NAME TRISTANI, ODINA  
STREET ADDRESS 13720 SW 90TH AVE H  
CITY-STATE-ZIP MIAMI FL

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

TITLE VD ☒ DELETE  
NAME BRYANT, EARLDEEN T.  
STREET ADDRESS 9500 SW 44TH ST  
CITY-STATE-ZIP MIAMI FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-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)(k), 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: *Robert A. Philpott* Robert A. Philpott

4/16/96 (305) 592-7770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone: #

CR2E034 (12/95)