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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1.	OCUMENT # 32365 Corporation Name BROOKER DEVELOPMENT CORF	(-)		L MERCE (INCO AND	(Åt ikki kikis sebe	1 8.3.1 6.6	ni Bidis Gigir (Gg.
9	ocpal Place of Business STATE ROAD 231	Mailing Address					
	ROUTE <u>1 Box 33</u> 8E Brooker FL 32622	ROUTE T BOX-030E BROOKER FL-32632					
				3. Date Incorporated or Qualified 11/30/1967	3a. Date (of Last F 5/15/19	
2. 1	Principal Place of Business	2a. Mailing Address		4. FEI Number		ТÙ	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.		59-1379902			Not Applicable 5 Additional
2		27		5. Certificate of Status Desired			Required
3	City & State	City & State		Election Campaign Financing Trust Fund Contribution			0 May Be
, 4	² (ρ Country	Zip	Country	B. This corporation has liability for	intangible tax		199.032,
4	25 9. Name and Address of Curren		30		S □ No		
	g, Name and Address of Curren	r negistered Agent	81 Name	10. Name and Address of New I	Registered A	gent	
	HODGES, E. W., JR.	•		W. Hodge S Iyess (P.O. Box Number is Not Acceptal			****
	487 WEST MADISON STREET P.O.	BOX 1262		tess (F.O. Box Number is Not Acceptal	D(0)		
	STARKE FL 32091		83				
			84 City	<i>t</i>		85 Z	ip Code
11.	Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes.	the above-named corpo	matter oration submits this statement for the bu	roose of chan		2044
	or registered again, or both, in the State of Floric familiar with, and accept the obligations of, Secti NATHER:	na. Such change was authorized on 607.0505, Florida Statutes.	Dy the corporation's boa	ard of directors. I hereby accept the app	xointment as re	egistered	d agent. I am
SIG	or registered agent, or both, in the State of Floric familiar with, and accept the obligations of Section NATURE Straton, Greet or printed have of registered agent	na. Such change was authorized on 607.0505, Florida Statutes.	Doy the corporation's boar Registered Agent signature require	ard of directors. I hereby accept the app	DATE	egistered	
SIG 12.	NATURE Signature, by extra printed name of registered agent OFFICERS ANI	na. Such change was authorized on 607.0505, Florida Statutes.	Dy the corporation's boa	ard of directors. I hereby accept the app	DATE	egistered	
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