SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # 330993 (7) R.F. BRENNAN, INC. Principal Place of Business Mailing Address 1428-A GULF TO BAY BLVD 1428-A GULF TO BAY BLVD CLEARWATER FL 34616-5703 CLEARWATER FL 34616-5703 3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1968 01/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1214623 Not Applicable ite Apt #, etc Suite Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country Country 8. This corporation has liability for intangible tax under s. 199 032. 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARDIMAN, MICHAEL C. 11729 PINE STREET 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32819 RR 84 City Zip Code 85 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 agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature is performed name of my breed agont end the dispolar action (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)THILE DELETE 1.1 TITLE Change Addition HARDIMAN, MICHAEL C. 1.2 NAME CR2E034 STREET ADDRESS 11729 PINE STREET 1.3 STREET ADORESS ORLANDO FL CITY-ST-ZIP 14 CITY-ST-ZIP TITLE DELETE 2.1 THE Charige Addition NAME HARDIMAN, THOMAS O. 2.2 NAME STREET ADDRESS 9530 BUTTERNUT COURT 2.3 STREET ADDRESS **NEW PORT RICHEY FL** CITY-ST-ZIP 2 4 CITY -ST - ZIP TITLE DELE1E 31 IIILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-7P 3.4 CITY-ST-ZIP TITLE DELETE 4111128 Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHTY - ST - ZIP THTLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 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)(k). Florida Statutes 1 forther certify that the information indicated on this are nat 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 office in director of any corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and 13 June 1996 813-446 5746. SIGNATURE: