

**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  
 CORPORATION  
 ANNUAL REPORT  
 1996



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

DOCUMENT # **353567** (1)

1. Corporation Name

**BUDD MAYER OPERATING COMPANIES, INC.**



Principal Place of Business

Mailing Address

601 LOMAX ST  
 JACKSONVILLE FL 32204-4000

3444 MEMORIAL HWY  
 MEMORIAL HWY  
 TAMPA FL 33607  
 US

3. Date Incorporated or Qualified

3a. Date of Last Report

10/09/1969

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 3444 MEMORIAL HWY.

26 3444 MEMORIAL HWY

4. FEI Number

Applied For

59-1272698

Not Applicable

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

TAMPA FL

TAMPA FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

33607

33607

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

ERGER, ROBERT B  
 3444 MEMORIAL HWY  
 TAMPA FL 33607

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 type and print the name of signor. (E, J, and T are not applicable)

(NOTE: Registered Agent signature required when constituting)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE

11 TITLE

SENIOR VICE-PRES.

Change  Addition

NAME FEUER, BARTON C  
 STREET ADDRESS 2930 BISCAYNE BLVD  
 CITY-ST-ZIP MIAMI FL

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

TITLE  DELETE

21 TITLE

EXECUTIVE VICE-PRES.

Change  Addition

NAME SUNDERLAND, C MICHAEL  
 STREET ADDRESS 3444 MEMORIAL HWY  
 CITY-ST-ZIP TAMPA FL

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

TITLE  DELETE

31 TITLE

Change  Addition

NAME CHADWICK, JERRALD C  
 STREET ADDRESS 601 LOMAX  
 CITY-ST-ZIP JACKSONVILLE, FL 0

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

TITLE  DELETE

41 TITLE

Change  Addition

NAME ERGER, ROBERT B  
 STREET ADDRESS 3444 MEMORIAL HWY  
 CITY-ST-ZIP TAMPA FL

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

TITLE  DELETE

51 TITLE

Change  Addition

NAME HEISEY, D  
 STREET ADDRESS 601 LOMAX  
 CITY-ST-ZIP JACKSONVILLE FL

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

TITLE  DELETE

61 TITLE

Change  Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Robert B. Erger Secy.*  
 ROBERT B. ERGER

7/22/96

813) 282-6900

CR2E034 (3/96)