## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # 470585

(1)

CHARLES BRIGANCE, INC.

FILED
Apr 24 1997 8:00am
Secretary of State

	e of Business	Mailing Address							II 2150 1091
414 LOCKSLEY LANE TALLAHASSEE FL \$2312			414 LOCKSLEY LANE TALLAHASSEE FL 32312-1903						
						3. Date Incorporated or Qualific 02/26/1975		te of Last F 01/1996	•
2. Principal P	lace of Business	2a. Mailing Addres	S			4. FEI Number			pplied For
21		26				59-1574138			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	tc.			5. Certificate of Status Desired			Additional lequired
City & State	Θ	City & State				6. Election Campaign Financing	)	\$5,00	May Be
23		28	·····			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	k	Country		8. This corporation has liability l			s. 199.032
24	25	[29]	30			Florida Statutes	Yes [		
	9, Name and Address of Curre	ent Hegistered Agent		81		10. Name and Address of New	Registered A	Agent	
	NNER JR., JAMES C.			81	Name				
	7 E TENNESSEE ST LAHASSEE FL 32308			82	Street Add	dress (P.O. Box Number is Not Accep	otable)		
IAL	ENTROSEL I E SESSO			83					<del></del> .
				64	City		FL	<b>85</b> Zip	Code
	to the provisions of sections 607.05 registered agent, or both, in the Staum familiar with, and accept the obli	te of florida Such change igations of, Section 607.05	was author 505, Florida	rized by Statutes	the corpora	rporation submits this statement for th ation's board of directors. I hereby ac	cept the appo	changing i pintment as	s registered
SIGNATURE	Signature, typed or printed nank of registered a								
		igent and title if applicable	(NOTE: Begis	stered Ager	nt signature requ	uired when reinstating)	DATE		
12.		ngent and title it applicable IND DIRECTORS		slered Ager <b>13.</b>	nt signature requ	uired when reinstating) ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
12. TITLE					nt signature requ			DIRECTOI	
	PD BRIGANCE, CHARLES	ND DIRECTORS	TÉ 1	13.	nt signature requ				
TITLE	OFFICERS A	ND DIRECTORS	1É 1	13. 1.1 TITLE					
TITLE NAME	PD BRIGANCE, CHARLES	ND DIRECTORS	1 TE 1 1	13. 1.1 TITLE 1.2 NAME	ADDRESS				
TITLE NAME STREET ADDRESS	PD BRIGANCE, CHARLES 414 LOCKSLEY LANE TALLAHASSEE FL D	ND DIRECTORS  DELE	1 TE 1 1	13. 1.1 TITLE 1.2 NAME 1.3 STREET.	ADDRESS				Addition
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Information indicated on this annual report of supplicemental annual report is frue and accurate and that my signature shall have this same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trybee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or nock it if changed, or on a guttaching with an address.

GNATURE:

##1994-385-1044-