

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

0314459

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **604020**

1. Corporation Name

BUNNELL, WOULFE, KIRSCHBAUM, KELLER, COHEN & MCINTYRE, P.A.



Principal Place of Business

**888 EAST LAS OLAS BOULEVARD
SUITE 400
FT LAUDERDALE FL 33301
US**

Mailing Address

**P.O. DRAWER 030340
FT LAUDERDALE FL 33303-0340
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1973

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1432412

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

X

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**BUNNELL, GEORGE E.
888 EAST LAS OLAS BOULEVARD
SUITE 400
FT LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	BUNNELL, GEORGE E.	
STREET ADDRESS	888 EAST LAS OLAS BLVD., SUITE 400	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	VPD	☐ DELETE
NAME	KELLER, D. DAVID	
STREET ADDRESS	888 EAST LAS OLAS BLVD., SUITE 400	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	SD	☐ DELETE
NAME	WOULFE, RICHARD T.	
STREET ADDRESS	888 EAST LAS OLAS BLVD., SUITE 400	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	VPD	☐ DELETE
NAME	KIRSCHBAUM, JOEL L	
STREET ADDRESS	888 EAST LAS OLAS BOULEVARD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	TD	☐ DELETE
NAME	MCINTYRE, W. EDWARD	
STREET ADDRESS	888 EAST LAS OLAS BOULEVARD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	VPD	☐ DELETE
NAME	Cohen, Jay	
STREET ADDRESS	888 East Las Olas Blvd., #400	
CITY-ST-ZIP	FT. Lauderdale, FL 33301	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VPD	☐ Change ☒ Addition
1.2 NAME	Gregoire, Nancy W.	
1.3 STREET ADDRESS	888 E. Las Olas Blvd., #400	
1.4 CITY-ST-ZIP	FT. Lauderdale, FL 33301	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

C daytime Phone #

4-13-99

954-761-8600

CR2E034 (11/98)