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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 604653

(6)

CORLETT KILLIAN, A PROFESSIONAL ASSOCIATION

Principal Place of Business Mailing Address 116 WEST FLAGLER ST. 116 WEST FLAGLER ST. MIAMI FL 33130 MIAMI FL 33130-1505 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1973 01/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 13642 Deering Bay Dr. 59-1485502 21 Not Applicable Suite Ant # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Miami, Florida Trust Fund Contribution Added to Fees Z_ip 8. This corporation has liability for intangible tax under s. 199.032, 33158 U.S.A. 24 25 Florida Statutes Yes X No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KILLIAN, A DAN JR 101 COSTA BRAVA DRIVE Street Address (P.O. Box Number is Not Acceptable) ISLAMORADA FL 33156 83 84 City 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: Typest or printed name of registered agent and title a applicable (NOTE: Registered Agent signature required when reinslating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PÑ TITLE DELETE 1.1 TITLE Change Addition CORLETT, E S III NAME 1.2 NAME 116 W FLAGER STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 00000 CITY - ST - ZIP 1.4 CITY-ST-ŹIP STD **X** DELETE TITLE 2.1 TITLE Secretary/Treasurer X Change Addition GRIGSBY, ANDREW E NAME Maria Elena Morales 2.2 NAME 116 WEST FLAGLER STREET 1992 Tindaro Drive STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY+ST ZIP Apopka, Florida 32703 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition KILLIAN, DAN A JR NAME 3.2 NAME 116 W FLAGER STREET STREET ADDRESS 3.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 34. CITY-ST-ZIP DELETE THE 4.1 TITLE ☐ Change ___ Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIF 4.4 CITY-ST-ZIP DELETE Till F 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE THI.E 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 6.4 CITY-ST-ZIP

GNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. S. Corlett, III

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

1/24/97

305-255-9298

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Daytime Phone #

FILED

Feb 06 1997 8:00am

Secretary of State