

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 604915 (9)

1. Corporation Name

CHILLDON & CHILLDON, P.A.

Principal Place of Business

**502 E. TYLER STREET
TAMPA FL 33602**

Mailing Address

**502 E. TYLER STREET
TAMPA FL 33602**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1973

3a. Date of Last Report

11/07/1994

4. FEI Number

59-1507570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Does corporation have liability for shareholder liability under
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHILLDON, JOHN A.
502 E TYLER STREET
TAMPA FL 33602**

81. Name

82. Street Address (if C) Box Number is Not Applicable

83.

84. City

FL

85.

Zip Code

11. Pursuant to the provisions of law, Chapter 190, Florida Statutes, the above named corporation submits the 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 this appointment as registered agent. I am not the sole proprietor of this corporation. (Chapter 190, Florida Statutes)

SUBMIT TO:

Secretary of State, Division of Corporations, 1000 Bank of America Building, Tallahassee, Florida 32399

File Fee: \$225.00 (plus \$10.00 per page for each page over 10 pages)

2/95

12. OFFICERS AND DIRECTORS

12.1	NAME	PSD CHILLDON, JOHN A 502 E. TYLER ST. TAMPA FL
12.2	NAME	
12.3	NAME	
12.4	NAME	
12.5	NAME	
12.6	NAME	
12.7	NAME	
12.8	NAME	
12.9	NAME	
12.10	NAME	
12.11	NAME	
12.12	NAME	
12.13	NAME	
12.14	NAME	
12.15	NAME	
12.16	NAME	
12.17	NAME	
12.18	NAME	
12.19	NAME	
12.20	NAME	
12.21	NAME	
12.22	NAME	
12.23	NAME	
12.24	NAME	
12.25	NAME	
12.26	NAME	
12.27	NAME	
12.28	NAME	
12.29	NAME	
12.30	NAME	
12.31	NAME	
12.32	NAME	
12.33	NAME	
12.34	NAME	
12.35	NAME	
12.36	NAME	
12.37	NAME	
12.38	NAME	
12.39	NAME	
12.40	NAME	
12.41	NAME	
12.42	NAME	
12.43	NAME	
12.44	NAME	
12.45	NAME	
12.46	NAME	
12.47	NAME	
12.48	NAME	
12.49	NAME	
12.50	NAME	
12.51	NAME	
12.52	NAME	
12.53	NAME	
12.54	NAME	
12.55	NAME	
12.56	NAME	
12.57	NAME	
12.58	NAME	
12.59	NAME	
12.60	NAME	
12.61	NAME	
12.62	NAME	
12.63	NAME	
12.64	NAME	
12.65	NAME	
12.66	NAME	
12.67	NAME	
12.68	NAME	
12.69	NAME	
12.70	NAME	
12.71	NAME	
12.72	NAME	
12.73	NAME	
12.74	NAME	
12.75	NAME	
12.76	NAME	
12.77	NAME	
12.78	NAME	
12.79	NAME	
12.80	NAME	
12.81	NAME	
12.82	NAME	
12.83	NAME	
12.84	NAME	
12.85	NAME	
12.86	NAME	
12.87	NAME	
12.88	NAME	
12.89	NAME	
12.90	NAME	
12.91	NAME	
12.92	NAME	
12.93	NAME	
12.94	NAME	
12.95	NAME	
12.96	NAME	
12.97	NAME	
12.98	NAME	
12.99	NAME	
12.100	NAME	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	NAME	☐ Change ☐ Addition
13.2	NAME	
13.3	NAME	
13.4	NAME	
13.5	NAME	
13.6	NAME	
13.7	NAME	
13.8	NAME	
13.9	NAME	
13.10	NAME	
13.11	NAME	
13.12	NAME	
13.13	NAME	
13.14	NAME	
13.15	NAME	
13.16	NAME	
13.17	NAME	
13.18	NAME	
13.19	NAME	
13.20	NAME	
13.21	NAME	
13.22	NAME	
13.23	NAME	
13.24	NAME	
13.25	NAME	
13.26	NAME	
13.27	NAME	
13.28	NAME	
13.29	NAME	
13.30	NAME	
13.31	NAME	
13.32	NAME	
13.33	NAME	
13.34	NAME	
13.35	NAME	
13.36	NAME	
13.37	NAME	
13.38	NAME	
13.39	NAME	
13.40	NAME	
13.41	NAME	
13.42	NAME	
13.43	NAME	
13.44	NAME	
13.45	NAME	
13.46	NAME	
13.47	NAME	
13.48	NAME	
13.49	NAME	
13.50	NAME	
13.51	NAME	
13.52	NAME	
13.53	NAME	
13.54	NAME	
13.55	NAME	
13.56	NAME	
13.57	NAME	
13.58	NAME	
13.59	NAME	
13.60	NAME	
13.61	NAME	
13.62	NAME	
13.63	NAME	
13.64	NAME	
13.65	NAME	
13.66	NAME	
13.67	NAME	
13.68	NAME	
13.69	NAME	
13.70	NAME	
13.71	NAME	
13.72	NAME	
13.73	NAME	
13.74	NAME	
13.75	NAME	
13.76	NAME	
13.77	NAME	
13.78	NAME	
13.79	NAME	
13.80	NAME	
13.81	NAME	
13.82	NAME	
13.83	NAME	
13.84	NAME	
13.85	NAME	
13.86	NAME	
13.87	NAME	
13.88	NAME	
13.89	NAME	
13.90	NAME	
13.91	NAME	
13.92	NAME	
13.93	NAME	
13.94	NAME	
13.95	NAME	
13.96	NAME	
13.97	NAME	
13.98	NAME	
13.99	NAME	
13.100	NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.02(6)(b), 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 person or persons empowered to execute this report as required by Chapter 190, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes to officers and directors with an address.

SIGNATURE:

[Signature]

JOHN A. CHILLDON, DIR.

5-18-95

813-876-3363

SIGNATURE AND TITLE OF SIGNING OFFICER OR DIRECTOR

DATE

PHONE NUMBER

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Tallahassee, FL 32399-0400

DOCUMENT # 604966

(2)

BOOKMAN & LEWIS, INCORPORATED

Principal Place of Business
4536 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308

Mailing Address
4536 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 01/22/1974 3a. Date of Last Report 03/28/1994

4. FEI Number 59-1501838 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. The Corporation has liability for attorneys' fees under Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BOOKMAN, ROBERT P.
4536 N. FEDERAL HWY.
FT. LAUDERDALE FL 33308

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

Agent or Registered Agent (Print Name) (Typed name of new agent)

Registered Agent (Print Name) (Typed name of new agent)

(Signature)

12. OFFICERS AND DIRECTORS

TITLE	PT
NAME	BOOKMAN, ROBERT P.
STREET ADDRESS	4536 N. FEDERAL HWY.
CITY, ST., ZIP	FT. LAUDERDALE FL
TITLE	VS
NAME	LEWIS, J MILTON
STREET ADDRESS	4536 N FEDERAL HWY
CITY, ST., ZIP	FT. LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
1.1 NAME	
1.2 STREET ADDRESS	
1.3 CITY, ST., ZIP	
2. TITLE	☐ Change ☐ Addition
2.1 NAME	
2.2 STREET ADDRESS	
2.3 CITY, ST., ZIP	
3. TITLE	☐ Change ☐ Addition
3.1 NAME	
3.2 STREET ADDRESS	
3.3 CITY, ST., ZIP	
4. TITLE	☐ Change ☐ Addition
4.1 NAME	
4.2 STREET ADDRESS	
4.3 CITY, ST., ZIP	
5. TITLE	☐ Change ☐ Addition
5.1 NAME	
5.2 STREET ADDRESS	
5.3 CITY, ST., ZIP	
6. TITLE	☐ Change ☐ Addition
6.1 NAME	
6.2 STREET ADDRESS	
6.3 CITY, ST., ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.0502, Florida Statutes. I further certify that the information made about 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 on Block 12, or Block 13, or Block 14, or on any other report without address.

SIGNATURE:

Robert P. Bookman
SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6-95 3057712/15