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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

DOCUMENT #

639535

(4)

**BRANDON ARCHITECTURE, INC.** 

Principal Place of Business

Mailing Address

FILED
May 04 1998 8:00am
Secretary of State



410 WARE BU TAMPA FL 330	VD., SUITE 500 B19	410 WARE BLVD SUITE TAMPA FL 33619	500	DO NOT WRITE IN THIS  3. Date Incorporated or Qualified  10/15/1979	3 SPACE	
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Applied For	
21 2105	Oak Hill Dr.	26 2105 Oak	Hill Dr.	59-1949096	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 Additional	
22	<u> </u>	27	<u> </u>	5. Certificate of Status Desired	Fee Required	
	ico, Florida	City & State  Valrico, F	Florida	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3359	Country U.S.	29 <b>33594</b>	Country	<ol> <li>This corporation owes or has paid the c Personal Property Tax due June 30.</li> </ol>	urrent year Intengible  Yes No	
	p. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	J Agent	
WEBSTER, WILLIAM R. B1 Name						
2105 OAKHILL DRIVE VALRICO FL 33594			B2 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
				,		
			63			
			84 City	F	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						
Oldfriffic	Signature, typed or printed name of registered agen		E Registered Agent signature r			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition	
NAME	WEBSTER, WILLIAM R.		1.2 NAME			
STREET ADDRESS	2105 OAKHILL DR.		1.3 STREET ADDRESS	·		
CITY-ST-ZIP	VALRICO FL	DELETE	1.4 CITY - ST - ZIP		Change Addition	
TITLE			2.1 TITLE		orange	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
TITLE			3.2 NAME		Charge Caronier	
NAME PERCET ADDRESS			3.3 STREET ADDRESS			
STREET ADDRESS			3.4. CITY-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change Addition	
NAME		_	4. 2 NAME		-	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
					The state of the s	

14. Thereby 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 ennual 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.

William R. Weister 4/24/48 (\$13.651-3525)