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FILED
Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 673588
1. Corporation Name

(0)

HALKEY-ROBERTS CORPORATION



Principal Place of Business

Mailing Address

11600 9TH STREET NORTH
ST. PETERSBURG FL 33716-2397
US

11600 9TH STREET NORTH
ST. PETERSBURG FL 33716-2320
US

3. Date Incorporated or Qualified
06/16/1980

3a. Date of Last Report
04/12/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-2013247

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324

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 as applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME GAMBLE, CHARLES S
STREET ADDRESS 11600 9TH ST NORTH
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

1.1 TITLE V
1.2 NAME JEFFERY Strickland
1.3 STREET ADDRESS 100 E. Second Street
1.4 CITY-ST-ZIP Sheffield, AL 35660 ☐ Change ☒ Addition

TITLE V
NAME PALUS, EDWARD J.
STREET ADDRESS 11600 9TH ST NORTH
CITY-ST-ZIP ST. PETERSBURG FL ☐ DELETE

2.1 TITLE C
2.2 NAME JERRY Howard
2.3 STREET ADDRESS 100 E. Second Street
2.4 CITY-ST-ZIP Sheffield, AL 35660 ☐ Change ☒ Addition

TITLE D
NAME LAMM, PETER
STREET ADDRESS 152 W 57TH ST
CITY-ST-ZIP NEW YORK NY ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME GREISSER, ANDREA
STREET ADDRESS 152 W 57TH ST
CITY-ST-ZIP NEW YORK NY ☒ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME DRESDALE, RICHARD C
STREET ADDRESS 152 W 57TH ST
CITY-ST-ZIP NEW YORK NY ☒ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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.

SIGNATURE:

Edward J. Palus

3/6/97

813 577 1300

CR2E034 (9/96)