FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 703788 (0)

1. Corporation Name
PEACOCK FOUNDATION, INC.

Principal Place of Business	Mailing Address
HENRY B PEACOCK JR 51 NW FIRST ST MIAMI FL 33128-691 US	HENRY B PEACOCK JR 51 NW FIRST ST MIAMI FL 33128-691 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/23/1962
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-0999759 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 International Place, Suite 2370	26 International Place, Suite 2370
Suite, Apt. #, etc. 22 100 SE 2 St.	Suite, Apt. #, etc. 27 100 SE 2 St.
City & State 23 Miami, FL	City & State 28 Miami, FL
Zip / Country 24 33131-2145 25 USA	Zip / Country 29 33131-2145 30 USA

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
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
PEACOCK JR,HENRY B 51 NW FIRST ST MIAMI FL 33128-1891	81 Name: Barbara A. Rickard 82 Street Address (P.O. Box Number is Not Acceptable): International Place, Suite 2370 83: 100 SE 2 St. 84 City: Miami, FL 85 Zip Code: 33131-2145

11. Pursuant to the provisions of Sections 607.0503 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: Barbara A. Rickard — Barbara A. Rickard, Executive Director, 4/21/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	1.1 TITLE		☒ Change ☐ Addition
NAME	PEACOCK, HENRY JR B	1.2 NAME	Delete as deceased 10/30/94	
STREET ADDRESS	51 N W 1ST STREET	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 91	1.4 CITY-ST-ZIP		
TITLE	SD	2.1 TITLE	S/T/D/M	☒ Change ☐ Addition
NAME	RICKARD B A	2.2 NAME	Barbara A. Rickard	
STREET ADDRESS	51 N W 1ST STREET	2.3 STREET ADDRESS	100 SE 2 Street, Suite 2370	
CITY-ST-ZIP	MIAMI FL 91	2.4 CITY-ST-ZIP	Miami, FL 33131-2145	
TITLE	VD	3.1 TITLE	P/D	☒ Change ☐ Addition
NAME	HEMMINGS, ARTHUR I	3.2 NAME		
STREET ADDRESS	2582 S E 7 COURT	3.3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL 10	3.4 CITY-ST-ZIP	Homestead, FL 33033-5210	
TITLE		4.1 TITLE	V/D	☐ Change ☒ Addition
NAME		4.2 NAME	Samuel L. Barr, Jr.	
STREET ADDRESS		4.3 STREET ADDRESS	801 Brickell Avenue, 19th Floor	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Miami, FL 33131	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara A. Rickard — Barbara A. Rickard 4/21/95 (305) 373-1386
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0008769