

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **851847** (4)

1. Corporation Name

ROBERT BRITIGAN & COMPANY



Principal Place of Business

**813 WEST SOUTH STREET
KALAMAZOO MI 49007**

Mailing Address

**813 WEST SOUTH STREET
KALAMAZOO MI 49007**

2. Principal Place of Business

21 **628 W Milham Road**

Suite, Apt. #, etc.

22 City & State

23 **Kalamazoo MI**

24 Zip Country

49002

25

2a. Mailing Address

26 **628 W. Milham Road**

Suite, Apt. #, etc.

27 City & State

28 **Kalamazoo MI**

29 Zip Country

49002

30

3. Date Incorporated or Qualified
02/12/1982

3a. Date of Last Report
05/01/1995

4. FEI Number

38-1912019

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

**MARSHALL, KENNETH L
1730 STICKNEY POINT RD
SARASOTA FL 34231**

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 607.0305, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
**PTD
BRITIGAN, ROBERT D., JR.
813 WEST SOUTH STREET
KALAMAZOO MI**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
BRITIGAN, SUSAN L.
813 WEST SOUTH STREET
KALAMAZOO MI**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
**S
CALDWELL, CARRIE
813 W SOUTH ST
KALAMAZOO MI**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**628 W. Milham Road
Kalamazoo MI 49002**

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**628 W. Milham Road
Kalamazoo MI 49002**

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

**628 W. Milham Road
Kalamazoo MI 49002**

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Carrie S. Caldwell

4-24-96 (616) 349-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)