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 # **F09262** **(9)**

1. Corporation Name

BREVARD-FLORIDA PROPERTIES, INC.

Principal Place of Business

6285 OLD MEDINAH CIRCLE
C/O WESTBROOKE
LAKE WORTH FL 33467
US

Mailing Address

6285 OLD MEDINAH CIRCLE
C/O WESTBROOKE
LAKE WORTH FL 33467
US

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

3. Date Incorporated or Qualified: 12/16/1980

3a. Date of Last Report: 04/24/1995

4. FEI Number: 59-2582069 — 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

STONE,ROBERT SR.,
6285 OLD MEDINAH CIRCLE
LAKE WORTH FL 33467

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE — Signature of Registered Agent or Executive Officer of Registered Agent — DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	WEHMEYER,HORST	
STREET ADDRESS	ELGINGER WEG 20	
CITY-ST-ZIP	4 DUSSELDORF 80 W.G.	
TITLE	D	☐ DELETE
NAME	STONE, ROBERT SR	
STREET ADDRESS	6285 OLD MEDINAH CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	SD	☐ DELETE
NAME	WOLLNY,RAINER M.	
STREET ADDRESS	UNTERSTAAT 45	
CITY-ST-ZIP	WEST GERMANY	
TITLE	TD	☐ DELETE
NAME	SCHAGEN,FRITZ	
STREET ADDRESS	WASSERWERKSWEG 14A	
CITY-ST-ZIP	WITTALAER,W.GERMANY	
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

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(s), 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 or possess 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 an attachment with an address.

SIGNATURE: Robert Stone Sr. — FEBRUARY 12, 1996 — (407) 434-4600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

ROBERT STONE SR.

CR2E034 (12/95)