

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 5:01

DOCUMENT # F13632 (7)

1. Corporation Name

THE STERLING LLOYD CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

Mailing Address

**947 CLINT MOORE ROAD
BOCA RATON FL 33487
US**

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BOCA RATON FL 33487
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1981

3a. Date of Last Report

06/02/1994

4. FET Number

59-2074554

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. 194.02,
Florida Statutes. ☒ Yes ☐ No

21. Principal Place of Business

26. Mailing Address

22. Suite, Apt. # etc.

27. Suite, Apt. # etc.

23. City & State

28. City & State

24. Country

25. Country

29. Country

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HIRSCHBERG, JEFFREY K.
947 CLINT MOORE ROAD
BOCA RATON FL 33487**

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 170, 171, and 172, 1988 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 172, 1988 Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of New Registered Agent or Director

Signature

OFFICER OR DIRECTOR

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

OFFICER OR DIRECTOR	ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
12. NAME: PD NAUGHTON, JOHN T STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL	13. NAME: PD NAUGHTON, JOHN T STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL
NAME: STD HIRSCHBERG, JEFFREY K. STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL	NAME: STD HIRSCHBERG, JEFFREY K. STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL
NAME: V HIRSCHBERG, JEFFREY K. STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL	NAME: V HIRSCHBERG, JEFFREY K. STREET ADDRESS: 947 CLINT MOORE ROAD CITY, STATE, ZIP: BOCA RATON FL
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 170.01(1)(b), 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 it makes under oath that I am an officer or director of the corporation or the person or persons empowered to make this report as required by Chapter 172, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an attachment with an address.

SIGNATURE:

[Signature]

JEFFREY K. HIRSCHBERG

4-27-95

4019977555

PRINTED NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR

Date

Registration Number