

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 12:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F54611

(1)

1. Corporation Name

BIRD HAVEN QUARANTINE II, INC.

8230 NW 56TH

Principal Place of Business

3000 GULF TO BAY BLVD.
6TH FLOOR
CLEARWATER FL 34619
US

Mailing Address

3000 GULF TO BAY BLVD.
6TH FLOOR
CLEARWATER FL 34619
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/10/1981

3a. Date of Last Report
02/23/1994

4. FEI Number
59-1155809

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

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

WILDER, MAURICE F.
3000 GULF TO BAY BLVD., 6TH FLOOR
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

01

Name

02

Street Address (P.O. Box Number is Not Acceptable)

03

04

City

FL

05

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 and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WILDER, MAURICE F.
3000 GULF TO BAY BLVD, 6 FLOOR
CLEARWATER FL 34619

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
WILDER, KATHY JO
3000 GULF TO BAY BLVD 6 FLOOR
CLEARWATER FL 34619

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HENTGES, PATRICIA
3000 GULF TO BAY BLVD, 6 FLOOR
CLEARWATER FL 34619

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

Patricia Hentges = Delete

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
MERRELL, THOMAS L.
3000 GULF TO BAY BLVD, 6 FLOOR
CLEARWATER FL 34619

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Peter E. Creighton
8447 Merrimoor Blvd. E.
Largo, FL 34647

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

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 110.07(3)(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 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Peter E. Creighton

Peter E. Creighton, Executive V.P.

2/2/95

(813) 799-2111