

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

SEAL - 1 MAY 1996

DOCUMENT # **F55057** (6)

1. Corporation Name:

BUDD MAYER COMPANY OF ORLANDO, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:

**730 BONNIE BRAE
WINTER PARK FL 32789
US**

Mailing Address:

**% ROBERT, EDGER ERGER
3444 MEMORIAL HWY
TAMPA FL 33607
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

21

2a. Mailing Address:

26

3. Date Incorporated or Organized:

11/17/1981

3a. Date of Last Report:

05/01/1994

4. FEI Number:

59-2138047

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 lately been changed by under S. 199 0.12
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent:

10. Name and Address of New Registered Agent:

**ERGER, ROBERT B
3444 MEMORIAL HWY
TAMPA FL 33607**

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 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to registered agent, in part 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 of Registered Agent (must be signed by the Registered Agent)

Signature of Registered Agent (must be signed by the Registered Agent)

12. OFFICERS AND DIRECTORS:

12.1 NAME	PD
12.2 STREET ADDRESS	CHADWICK, JERRALD
12.3 CITY, STATE, ZIP	2930 BISCAYNE BLVD MIAMI FL
12.4 NAME	VP
12.5 STREET ADDRESS	THORNHILL, DAVID
12.6 CITY, STATE, ZIP	2930 BISCAYNE BLVD MIAMI FL
12.7 NAME	D
12.8 STREET ADDRESS	FEILER, BARTON C
12.9 CITY, STATE, ZIP	2930 BISCAYNE BLVD MIAMI FL
12.10 NAME	ST
12.11 STREET ADDRESS	ERGER, R B
12.12 CITY, STATE, ZIP	2930 BISCAYNE BLVD MIAMI FL
12.13 NAME	D
12.14 STREET ADDRESS	SUNDERLAND, C MICHAEL
12.15 CITY, STATE, ZIP	2930 BISCAYNE BLVD MIAMI FL
12.16 NAME	
12.17 STREET ADDRESS	
12.18 CITY, STATE, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

13.1 NAME	☒ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	610 LOMAX ST.
13.4 CITY, STATE, ZIP	JACKSONVILLE FL 32204
13.5 NAME	☒ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	730 BONNIE BRAE
13.8 CITY, STATE, ZIP	WINTER PARK FL 32789
13.9 NAME	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	ROBERT B. ERGER
13.12 CITY, STATE, ZIP	3444 MEMORIAL HWY. TAMPA FL 33607
13.13 NAME	☒ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	3444 MEMORIAL HWY
13.16 CITY, STATE, ZIP	TAMPA FL 33607
13.17 NAME	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, STATE, ZIP	

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 119.021, Florida Statutes. I further certify that the information included in the 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 officer or director empowered to execute this report as required by Chapter 147, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Robert B. Erger

ROBERT B. ERGER

4/28/95 813) 282-6900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR