

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

0279625

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # F60037

1. Corporation Name  
A.J. PANZARELLA & CO. INC.

Principal Place of Business: 7060 SW 22 CT, DAVIE FL 33317

Mailing Address: 110 SE 6TH ST, 20TH FL, FT LAUDERDALE FL 33301, US

2. Principal Place of Business: 21 110 S.E. 6th St., Suite, Apt #, etc 28th FLOOR, City & State Ft. LAUDERDALE, FL, Zip 33301, Country US

2a. Mailing Address: 26 110 S.E. 6th St., Suite, Apt #, etc 28th FLOOR, City & State Ft. LAUDERDALE, FL, Zip 33301, Country US

59-2162348

03/12/99

01086-002

800002792898

03/12/99-01086-002

\*\*\*\*150.00 \*\*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/01/1982

4. FEI Number: 59-2162348

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 owes the current year Intangible Personal Property Tax: [ ] Yes [ ] No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent: C T CORPORATION SYSTEM, 1200 S PINE ISLAND RD, PLANTATION FL 3324

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 607.0505, Florida Statutes.

SIGNATURE: Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent Signature required when registering.) DATE:

12. OFFICERS AND DIRECTORS

TITLE	PD	<del>DELETE</del>
NAME	HUDSON, HARRIS W	
STREET ADDRESS	110 SE 6TH ST 20TH FL	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	VS	<del>DELETE</del>
NAME	COLE, JAMES O	
STREET ADDRESS	110 SE 6TH ST 20TH FL	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	V	<del>DELETE</del>
NAME	WRIGHT, PETER	
STREET ADDRESS	110 SE 6TH ST 20TH ST	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	V	<del>DELETE</del>
NAME	KILBURN, DAN	
STREET ADDRESS	110 SE 10TH ST 20TH FL	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	AST	<del>DELETE</del>
NAME	HYLE, KATHLEEN	
STREET ADDRESS	110 SE 6TH ST 20TH FL	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	AT	<del>DELETE</del>
NAME	SILLS, HOWARD	
STREET ADDRESS	110 SE 6TH ST 20TH FL	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE: [ ] Change [ ] Addition

12 NAME: D HARRIS W. HUDSON

13 STREET ADDRESS: 110 S.E. 6th St., 28th FLOOR

14 CITY-ST-ZIP: Ft. LAUDERDALE, FL 33301

21 TITLE: [ ] Change [ ] Addition

22 NAME: P JAMES H. COSMAN

23 STREET ADDRESS: 110 S.E. 6th St, 28th FLOOR

24 CITY-ST-ZIP: Ft. LAUDERDALE, FL 33301

31 TITLE: [ ] Change [ ] Addition

32 NAME: S DAVID A. BARCLAY

33 STREET ADDRESS: 110 S.E. 6th St. 28th FLOOR

34 CITY-ST-ZIP: Ft. LAUDERDALE, FL 33301

41 TITLE: [ ] Change [ ] Addition

42 NAME: T Edward A. LANG

43 STREET ADDRESS: 110 S.E. 6th St. 28th FLOOR

44 CITY-ST-ZIP: Ft. LAUDERDALE, FL 33301

51 TITLE: 800002792898

52 NAME: -03/12/99-01086-002

53 STREET ADDRESS: \*\*\*\*150.00 \*\*\*\*150.00

54 CITY-ST-ZIP:

61 TITLE: [ ] Change [ ] Addition

62 NAME: J.D. Sills

63 STREET ADDRESS:

64 CITY-ST-ZIP:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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; that 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 the attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/99 (954) 769-2928

Date Daytime Phone #

CR2E034 (11/98)