

F69453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

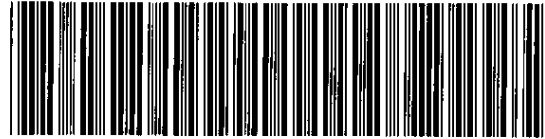
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300368869653

J. Marshall Gifford, P. A.
ATTORNEY AND COUNSELOR AT LAW

J. Marshall Gifford
4130 Fleming Street
Key West, Florida

POST OFFICE BOX 4132
KEY WEST, FLORIDA 33040
February 25, 1982

Telephone
305-294-0040
305-294-6009

F69453

OW 3/12/82

006-0091 3/2/82 30.00
006-0091 3/2/82 15.00
006-0091 3/2/82 15.00
006-0091 3/2/82 15.00
006-0091 3/2/82 15.00

RE: DR. JIM GERBRACHT, P.A.

Dear Sir:

Enclosed are the Articles of Incorporation with my check
in the amount of \$63.00 to cover the filing fee.

Please return certified copy to the above address.

Yours very truly,

J. Marshall Gifford
J. MARSHALL GIFFORD

JMG/jw
Enclosures

FILED
MAR 3 2 33 PM '82
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3-2-82
SRZ 3/3
H.M. 3/10/82
DO 311

E69453

ARTICLES OF INCORPORATION

OF

DR. JIM GERBRACHT, P.A.

FILED
MAR 3 2 33 PM '87
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned subscriber, hereby make, subscribe, acknowledge and file these Articles for the purpose of becoming a corporation under the laws of the State of Florida.

Article I

Name

The name of this corporation shall be:

DR. JIM GERBRACHT, P.A.

Article II

Nature of Business

The general nature of the business is to engage in any lawful act or activity for which a corporation may be organized under the general corporation laws of the State of Florida, including but not limited to the providing of chiropractic services to the public.

The corporation is authorized and empowered to do all things necessary to carry on and accomplish the purposes for which it is organized and chartered, including authority and power:

(a) To construct, erect, build, equip, repair and improve vessels, houses, buildings, tracts, streets, sidewalks, piers, warfs and other structures and improvements of any kind and character whatsoever; to buy, sell or otherwise acquire, handle, hold and dispose of real and personal property or any interest therein.

(b) To manage, supervise, operate, control, lease, let and sublet apartments, office buildings, dwelling houses, vessels and all kinds and character of property of every nature whatsoever.

(c) To manufacture, purchase or otherwise acquire, and to own and mortgage, pledge, sell and assign and transfer or otherwise dispose of, and to invent, trade, deal in and deal with goods, wares, merchandise and other personal property of every class and description whatsoever.

(d) To buy, sell, manufacture, repair, alter and exchange, let or hire, export and deal in all kinds of articles and things which may be required for the purpose of any of the said business or commonly

supplied or dealt in by persons engaged in any such businesses, or which may seem capable of being profitably dealt with in connection with any of the said businesses or endeavor which may be desired to be dealt in.

(e) To borrow money and contract debts when desirable for the transaction of its business or for the exercise of the corporate rights, privileges or franchises, or for any other lawful purpose of the incorporation; to issue bonds, promissory notes, bills of exchange, debentures, and other obligations and evidences of indebtedness payable at a specified time or times, or payable upon the happening of a specified event or events, secured or unsecured, from time to time, for monies borrowed, or in payment for the property acquired, or for any of the objects of its business; to secure the same by mortgage or mortgages or deeds or deeds of trust, or pledge or other lien upon any or all of the property, rights, privileges or franchises of the corporation, where-soever situated, acquired, or to be acquired; to sell, pledge or otherwise dispose of any or all debentures or other bonds, notes or other obligations in such manner and upon such terms as the Stockholders, Board of Directors, or officers may deem judicious, subject however to the provisions of Article III hereof.

(f) To acquire by purchase, subscription or otherwise, and to hold for investment, and to own, hold, sell, vote, and handle shares of stock in other corporations and engage in the same or other character of businesses of such other corporations.

(g) To guarantee, to acquire by purchase, subscription or otherwise hold for investment or otherwise sell, assign, transfer, mortgage, pledge or otherwise dispose of shares of the capital stock of, or any bonds, securities or evidences of indebtedness created by any other corporations or a corporation of the State of Florida, or any other state government, domestic or foreign and while the owner of any such stocks, bonds, securities or evidences of indebtedness, to exercise all the rights, powers and privileges of ownership, including the right to vote thereon for any and all purposes.

(h) To purchase, hold, sell and transfer the shares of its own

capital stock in such a manner as not to violate the Florida Statutes nor the by-laws.

(i) To have one or more officers conduct its business and promote its objects within and without the State of Florida, in other states and countries.

(j) To acquire, hold, own, dispose of and generally deal in grants, concessions, franchises and contracts of every kind; to cause to be formed, to promote and to aid in any way in the formation of any corporation, domestic or foreign.

(k) To enter into, make and perform contracts of every kind and description.

(l) To acquire in any manner, enjoy, utilize, hold, sell, assign, lease, mortgage or otherwise dispose of, letters of patent of the United States or any foreign country, patents, patent rights, licenses and privileges, inventions, improvements and processes, copyrights, trademarks and trade names, or pending applications thereof, relating to or useful in connection with any business of the corporation or any other corporation in which the corporation may have an interest as a stockholder or otherwise.

(m) To act as financial, business and purchasing agent for domestic and foreign corporations, individuals, partnerships, associations, state governments or other bodies.

(n) To do all and everything necessary and proper for the accomplishment of any of the purposes or the attaining of any of the objects or the furtherance of any of the powers enumerated in these Articles of Incorporation or any amendment thereof, necessary or incidental to the protection and benefit of the corporations, firms or individuals, to carry on any lawful business necessary or incidental to the accomplishment of the purposes or the attainment of the objects or furtherance of such purposes and objects set forth in these Articles of Incorporation or any amendment thereof.

(o) To enjoy all the powers now or hereafter empowered upon corporations by the statutes and laws of the State of Florida.

The foregoing paragraphs shall be construed as enumerating both

objects and powers of the corporation, and it hereby expressly provides that the foregoing enumeration of specific powers shall not be held to limit or restrict in any manner the powers of this corporation.

Article III
Capital Stock

The maximum number of shares of capital stock of this corporation shall be Five Thousand (5,000) shares of common stock with par value of one (\$ 1.00) dollar. Stock may be paid for in cash, property, labor or services, at a just valuation to be determined and fixed by the Board of Directors. Property, labor or services may be purchased and paid for with capital stock of this corporation at a just valuation to be determined and fixed by the Board of Directors.

Article IV
Initial Capital

The amount of capital with which the corporation shall begin business is not less than Five Hundred (\$500.00) dollars.

Article V
Term

This corporation shall have perpetual existence.

Article VI
Address

The street address in this state of the principal office of the corporation is 2325 Seidenberg Avenue, Key West, Florida 33040

The Board of Directors may from time to time move the office to any other place in Florida.

Article VII
Directors

This corporation shall have one (1) director initially. The number of directors may either be increased or decreased from time to time, by the by-laws, but shall never be less than one.

Article VIII
Initial Directors

The name and post office address of the initial member of the initial Board of Directors of the corporation who shall hold office for the First year of the corporation are: DR. JIM GERBRACHT
2325 Seidenberg Avenue, Key West, Florida 33040.

Article IX
Subscriber

The name and address of the subscriber of these Articles of Incorporation and the number of shares which they agree to take are as follows:
DR. JIM GERBRACHT, 2325 Seidenberg Avenue, Key West, Fl. - 500 shares

Article X
Initial Officers

The officers of the corporation shall be a President and a Secretary/Treasurer, which said offices may be held by one person. The Officers are:

DR. JIM GERBRACHT - President, Secretary/Treasurer

Article XI
Other Provisions

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, and any rights conferred upon the stockholders is subject to this reservation.

The initial by-laws of this corporation shall be adopted by the Directors. The by-laws may be amended from time to time by either the stockholders, or the Board of Directors, but the Directors may not alter or amend any by-law adopted by the Stockholders.

Ownership of stock shall be required to make any person eligible to hold office either as an officer or Director of this corporation.

The stockholders, may, by provision of by-laws or by stockholders agreement, record in the minute book, impose such restrictions on the sale, transfer or encumbrance of the stock of this corporation as they may see fit.

Any subscriber or stockholder present at any meeting, either in person or by proxy, and any director present in person at any meeting of the Board of Directors shall conclusively be deemed to have received proper notice of such meeting unless he shall make objection at such meeting to any defect or insufficiency of notice.

Any contract or other transaction between the corporation and one or more of the directors, or between the corporation and any firm of which one or more of its Directors are members or employees, or in which they are interested, or between the corporation and any other corporation or association of which one or more of its Directors are shareholders, members, directors, officers or employees, or in which they are interested, shall be valid for all purposes, notwithstanding the presence of such Director or Directors at the meeting of the Board of Directors of the corporation which acts upon or in reference to subcontract or transaction and notwithstanding his or their participation in such action. This section shall not be construed to invalidate any contract or other transaction which should otherwise be valid under the common and statutory law applicable thereto.

The Board of Directors are hereby specifically authorized to make provisions for reasonable compensation to its members for their services as Directors, and to fix the basis and conditions upon which such compensation shall be paid. Any director of the corporation may also serve the corporation in any other capacity and receive compensation therefor in any form.

A simple majority shall be sufficient to permit or ratify the acts of the stockholders or of the Directors, then present and voting and constituting a quorum.

Acts of the Majority stockholders shall be acts of the corporation, when acting in that capacity, and clearly indicated as such.

DR. JIM GERBRACHT being the original subscriber
to the capital stock hereinbefore named for the purpose of forming a
corporation to do business both within and without the State of Florida,
do hereby make and file these Articles of Incorporation, hereby declaring
and certifying that the facts herein stated are true, and do respectively
agree to take the number of shares of stock hereinbefore set forth, and
accordingly have hereunto set my hand and seal.

Jim Gerbracht (SEAL)
JIM GERBRACHT

____ (SEAL)

____ (SEAL)

STATE OF FLORIDA
COUNTY OF MONROE

BEFORE ME, the undersigned authority, a Notary Public in and
for the State of Florida at large, an officer duly authorized to take ack-
nowledgments or deed and other instruments, personally appeared _____

DR. JIM GERBRACHT

the person described in and who executed the foregoing Articles of Incor-
poration, and did acknowledge before me that he executed the same freely
and voluntarily and for the uses and purposes in said instrument set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my
official seal this 25th day of February, A. D. 19 82.

Marlene J. Watson
Notary Public, State of Florida

My Commission Expires:

(SEAL)

Notary Public, State of Florida
My Commission Expires May 19, 1985
Exempt From 1985-1986 Successor Fee

DESIGNATION OF REGISTERED AGENT AND OFFICE

The Registered Office shall be 2325 Seidenberg Avenue,
Key West, Florida 33040

The initial Registered Agent shall be: DR. JIM GERBRACHT

Jim Gerbracht

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1983



George F. Fanning
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
FILED
APR 20 12 20 PM 1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State, HASSELL, FLORIDA

1. Name and Address of Corporation Principal Officer		2. Enter Change of Address of Corporation Principal Officer (P.O. Box Number, if any, not sufficient)	
FL 9453 DR. JIM GERBRACHT, P.A. 2 DR. JIM GERBRACHT 2325 SEIDENBERG AVE KEY WEST, FL 33040		Street Address	
		P.O. Box No.	
		City	
		State Zip Code	

If above address is incorrect in any way, enter the correct address in item 3. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN) N/A	5. Date of Last Meeting
03/03/1982		

6. Names and Street Addresses of Each Officer and Director		7. Street Address of Each Officer and Director (Do NOT Use P.O. Box Number)	8. City and State
GERBRACHT, JIM (DR.)	P/S/T	2325 SEIDENBERG AVE	KEY WEST, FL
GERBRACHT, JIM (DR.)	D	2325 SEIDENBERG AVE	KEY WEST, FL

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
GERBRACHT, JIM (DR.) 2325 SEIDENBERG AVE KEY WEST, FL 33040		Name	
		Street Address (Do NOT Use P.O. Box Number)	
		City, State and Zip Code	

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, at the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____.

SIGNATURE _____ DATE _____

(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute this Report as Required by Chapter 552 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature: <i>Dr. Jim Gerbracht</i>	Date: March 17, 1983
Typed Name of Signing Officer: Dr. Jim Gerbracht	Telephone Number: (305) 294-6111

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**

1984



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

JUN 15 1984

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office: FL 9453 DR. JIM GERBRACHT, P.A. 2 DR. JIM GERBRACHT 2325 SEIDENBERG AVE KEY WEST, FL 33040		2. Enter Change of Address of Corporation Principal Office: P.O. Box Number Alone is NOT Sufficient. Street Address: 615-A United Street P.O. Box No. City: Key West State: Florida Zip Code: 33040	
--	--	---	--

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida: 03/03/1982	4. Federal Employer Identification Number (FEIN): 59-2274933	5. Date of Last Report: 04/20/1983
---	--	------------------------------------

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1 GERBRACHT, JIM (DR.)	P/S/T	2325 SEIDENBERG AVE	KEY WEST, FL
2 GERBRACHT, JIM (DR.)	D	2325 SEIDENBERG AVE	KEY WEST, FL
1 Gerbracht, Jim (Dr.)	P/S/T	615-A United Street	Key West, FL
2 Gerbracht, Jim (Dr.)	D	615-A United Street	Key West, FL

Registered Agent Information

7. Name and Address of Current Registered Agent: GERBRACHT, JIM (DR.) 2325 SEIDENBERG AVE KEY WEST, FL 33040	8. Name and Address of New Registered Agent: Name: Gerbracht, Jim (Dr.) Street Address (Do NOT Use P.O. Box Number): 615-A United Street City, State and Zip Code: Key West, Florida 33040
---	---

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature: <i>Dr. Jim Gerbracht</i>	Date: June 18, 1984
Typed Name of Signing Officer: Dr. Jim Gerbracht	Title: Treasurer, Director President, Secretary Telephone Number: (305) 294-6111

11. Should you desire a certificate of status check the box below and include an additional \$5.00 with your payment.

CERTIFICATE OF STATUS DESIRED ☐
\$5 Additional fee required for certificates.

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1985



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
APPROVED
FILED
1985 JUN 10 AM 11:31

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office FL 9453-1 DR. JIM GERBRACHT, P.A. 615 A UNITED ST KEY WEST, FL 33040		2. Full Change of Address of Corporation Principal Office FILE A P.O. Box Number Alone is NOT Sufficient Street Address P.O. Box No. City State Zip Code	
--	--	---	--

3. Date Incorporated or Qualified To Do Business in Florida: 03/03/1982	4. Federal Employer Identification Number (EIN): 59-2274933	5. Date of Last Report: 07/09/1984
--	--	---

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1. GERBRACHT, JIM	P/S/T	615 A UNITED ST	KWY WEST, FL 0000
2. GERBRACHT, JIM	D	615 A UNITED ST	KWY WEST, FL 0000
3.			
4.			
5.			
6.			

Registered Agent Information

7. Name and Address of Current Registered Agent GERBRACHT, JIM 615 A UNITED ST KEY WEST, FL 33040	8. Name and Address of New Registered Agent Name Street Address (Do NOT Use P.O. Box Number) City, State and Zip Code
---	--

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent; I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See Signature Instructions under instructions on reverse side of this form.
 (Certify That I Am An Officer of the Corporation; the Receiver or Trustee Empowered to Execute This Report is Required by Chapter 607 F.S. (Former Chpt. 34) That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
 Officer signing must be listed in Block 3)

Signature: <i>Dr. Jim Gerbracht</i>	Date: June 10, 1985
Type: Name of Signing Officer: Dr. Jim Gerbracht	Telephone Number: (305) 294-6111
Title: President	

11. Should you desire a Certificate of Status? (Firm only) ☐ **CERTIFICATE OF STATUS DESIRED** ☐

\$5 additional fee required for a Certificate of Status

CR-003 (1-85)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986



FLORIDA DEPARTMENT OF STATE
George F. Jimeno
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

F69453
DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST, FL 33040

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Alone (is NOT sufficient)

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida 03/03/1982

4. Federal Employer Identification Number (FEIN) 59-2274933

5. Date of Last Report 06/18/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1985

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
GERBRACHT, JIM	P/S/T	615 A UNITED ST	KEY WEST, FL	00000
GERBRACHT, JIM	D	615 A UNITED ST	KEY WEST, FL	00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040

8. Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83

FL

Zip Code 84

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.035, F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

10.

See signature instructions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer signing must be listed in Block 6)

Signature

Date

Typed Name of Signing Officer

Title

Telephone Number

Dr. Jim Gerbracht

President

(305) 294-6111

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee required for a Certificate of Status

ONEC04 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987 APPROVED

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1987 JUN 22 AM 10:09

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

FL9453
DR. JIM GERBRACHT, P.A.
615 A UNITED ST.
KEY WEST, FL 33040

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida

03/03/1982

4. Federal Employer Identification Number (FEIN)

59-2274933

5. Date of Last Report

06/24/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986.

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
GERBRACHT, JIM	P/S/T	615 A UNITED ST	KEY WEST, FL	00000
GERBRACHT, JIM	D	615 A UNITED ST	KEY WEST, FL	00000

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent

7. Name and Address of Current Registered Agent

GERBRACHT, JIM
615 A UNITED ST.
KEY WEST, FL 33040

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on 6/10/87

I hereby accept the appointment of registered agent; I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

Jim Gerbracht (signature not necessary)
(Registered Agent Accepting Appointment)

DATE June 10, 1987

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
(Officer signing must be listed in Block 6).

Signature

Jim Gerbracht

Date

June 10, 1987

Typed Name of Signing Officer

Jim Gerbracht

Title

President

Telephone Number

204-6111

Area Code 305

11. Should you desire a certificate of status check this box.

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee required for a Certificate of Status

CR2004 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUL - 8 PM 1 51

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

P69453
DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST, FL 33040

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 03/03/1982

4. Federal Employer Identification Number (FEIN) 59-2274933

5. Date of Last Report 06/22/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
GERBRACHT, JIM	P/S/T	615 A UNITED ST	KEY WEST, FL
GERBRACHT, JIM	D	615 A UNITED ST	KEY WEST, FL

REGISTERED AGENT INFORMATION

B. Name and Address of New Registered Agent

Name B1

Street Address 1 (Do NOT Use P.O. Box Number) B2

Street Address 2 (Do NOT Use P.O. Box Number) B3

City and State B4

FL

Zip Code B5

7. Name and Address of Current Registered Agent
GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statute, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____
(Registered Agent Accepting Appointment)

DATE _____

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature *James J. Gerbracht*
Typed Name of Signing Officer or Director James J. Gerbracht

Title President

Date June 27, 1988

Telephone Number (305) 294-6111

12. Should you desire a certificate of status check the box _____

CERTIFICATE OF STATUS DESIRED ☐

CR25004 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
Jan Smith
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
FILED
JUN 20 AM 11:07
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP - 4

F69453-1
DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST, FL 33040-3229

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified

03/03/1982

4. Federal Employer

Identification Number (FEIN) 59-2274933

5. Date of

Last Report 07/08/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
P/S/T	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL	
D	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040

8. Name and Address of New Registered Agent

Name 81	
Street Address 1 (Do NOT Use P.O. Box Number) 82	
Street Address 2 (Do NOT Use P.O. Box Number) 83	
City and State 84	Zip Code 85

FL

9. Pursuant to the provisions of Sections 607.004 and 607.007, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, date first commenced business in Florida _____

11. One signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature	Date
James T. Gerbracht	June 13, 1989
Title	Telephone Number
President	(305) 294-6111

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

FD-2000000

**CORPORATION
ANNUAL REPORT
1990**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
**APPROVED
AND
FILED**

1990 JUL -2 PM 12:19

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

F69453 1
ZIP + 4 PRESORT

**DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST, FL 33040-3229**

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation cannot be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualifying To Do Business in Florida

03/03/1982

4. FEI Number

59-2274933

☐ FEI Number Applied For
☒ FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
P/S/T	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL	
D	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040**

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____

(Registered Agent Accepting Appointment)

DATE _____

10. I 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 effects as if made under oath. I further certify that I am an officer or director of the corporation or the holder of trustee empowered to execute this report as required by Chapter 607, F.S.

Signature _____

Date **June 25, 1990**

Typed Name of Signing Officer or Director

Title

President

Telephone Number

(305) 294-6111

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

SE: National Fee
required by a
Certificate of Status

**FILE NOW! AMOUNT DUE \$61.25 OR CORPORATION WILL BE
DISSOLVED ON OR AFTER OCTOBER 9, 1991.**

**CORPORATION
ANNUAL REPORT
1991**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AM-791

**APPROVED
FL DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL
FILED**

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT # F69453 (1)**
ZIP + 4 PRESORT

**DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST, FL 33040-3229**

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21. Street Address

22. P.O. Box No.

23. City and State

24. Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2.

3. Date Incorporated or Qualified
To Do Business in Florida

03/03/1982

4. FEI Number

59-2274933

FEI Number Applied For

FEI Number Not Applicable

5. **\$8.75 Additional Fee required
for a Certificate of Status**

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
P/S/T	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL
D	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040**

8. Name and Address of New Registered Agent

81. Name	
82. Street Address 1 (Do NOT Use P.O. Box Number)	
83. Street Address 2 (Do NOT Use P.O. Box Number)	
84. City	85. Zip Code
	FL

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508 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 _____
(Registered Agent Accepting Appointment)

DATE _____

10. I 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE _____

DATE _____

Typed Name of Signer, Officer or Director

Title

Telephone Number, Daytime

James J. Gerbracht

president

(305) 294-6111

FILING FEE OF \$61.25 REQUIRED — Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required for a Certificate of Status**

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

CORPORATION

ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 22

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL
FILED

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT # F69453 (1)**

**DR. JIM GERBRACHT, P.A.
615 A UNITED ST
KEY WEST FL 33040-3229**

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: **03/03/1982**

3a. Date of Last Report: **08/07/1991**

3b. FEI Number: **59-2274933**

5. \$6.75 Additional fee required for a Certificate of Status
FEE Number Applied For: ☐
FEE Number Not Applicable: ☒ **CERTIFICATE OF STATUS DESIRED**

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
1x P/S/T	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL
2x D	GERBRACHT, JIM	615 A UNITED ST	KEY WEST, FL
3			
3x			
4			
4x			
5			
5x			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**GERBRACHT, JIM
615 A UNITED ST
KEY WEST, FL 33040**

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Numbers)

83 Street Address 2 (Do NOT Use P.O. Box Numbers)

84 City

FL

85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1506 or Sections 617.0502 and 617.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as both in the State of Florida. Such change was authorized by the corporation's Board of Directors. Thereby attesting the corporation as registered agent, I am authorized, with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S. 190.002, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

11. I certify that the information indicated on this annual report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of the corporation or the holder of a power of attorney or other authority to execute the report as required by Chapter 607, Florida Statutes. I am not an agent or attorney in Block 6 or an attorney with an address.

SIGNATURE: *James J. Gerbracht* DATE: April 13, 1992

Typed Name of Signing Officer or Director: James J. Gerbracht Title: President Corporate Name and Number: 305 294-6111

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee. ☐

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 6/10/94: \$225 (IF DISSOLVED; MINIMUM AMOUNT DUE TO REINSTATE: \$225)

**APPROVED
AND
FILED**

94 AUG -2 AM 10:04

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT**



**FLORIDA DEPARTMENT OF STATE
JIM GUNDS
Secretary of State
DIVISION OF CORPORATIONS**

1994

DOCUMENT # F69453 (1)

**1. Corporation Name
DR. JIM GERBRACHT, P.A.**

**Mailing Address
615 A UNITED ST
KEY WEST FL 33040**

**Principal Place of Business
615 A UNITED ST
KEY WEST FL 33040**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created: 03/03/1982
3a. Date of Last Report: 05/01/1993

4. FEI Number: 59-2274933
☐ Added For ☐ Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Requested
☐ **6. Election Company Financing Trust Fund Contribution** ☐

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S-196.032 Florida Statutes ☒ Yes ☐ No

2. Mailing Address
2a. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip **24. Country**
25. Suite, Apt. #, etc.
26. City & State
27. Zip **28. Country**
29. Suite, Apt. #, etc.
30. City & State
31. Zip **32. Country**

9. Name and Address of Current Registered Agent

**GERBRACHT, JIM
615 A UNITED ST
KEY WEST FL 33040**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **85. Zip Code** **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506 or Sections 617.0502 and 617.1506, 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 or 617.0503, Florida Statutes.

SIGNATURE
Signature of officer or director of corporation and its address
Signature of Registered Agent (Signature required when necessary)

12. CHANGES TO OFFICERS AND DIRECTORS
12.1 TITLE: P/SIT
12.2 NAME: GERBRACHT, JIM
12.3 STREET ADDRESS: 615 A UNITED ST
12.4 CITY- ST- ZIP: KEY WEST FL
12.5 TITLE: D
12.6 NAME: GERBRACHT, JIM
12.7 STREET ADDRESS: 615 A UNITED ST
12.8 CITY- ST- ZIP: KEY WEST FL
12.9 TITLE:
12.10 NAME:
12.11 STREET ADDRESS:
12.12 CITY- ST- ZIP:
12.13 TITLE:
12.14 NAME:
12.15 STREET ADDRESS:
12.16 CITY- ST- ZIP:
12.17 TITLE:
12.18 NAME:
12.19 STREET ADDRESS:
12.20 CITY- ST- ZIP:

13. CHANGES TO OFFICERS AND DIRECTORS
13.1 TITLE:
13.2 NAME:
13.3 STREET ADDRESS:
13.4 CITY- ST- ZIP:
13.5 TITLE:
13.6 NAME:
13.7 STREET ADDRESS:
13.8 CITY- ST- ZIP:
13.9 TITLE:
13.10 NAME:
13.11 STREET ADDRESS:
13.12 CITY- ST- ZIP:
13.13 TITLE:
13.14 NAME:
13.15 STREET ADDRESS:
13.16 CITY- ST- ZIP:
13.17 TITLE:
13.18 NAME:
13.19 STREET ADDRESS:
13.20 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(2)(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 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or in an attachment with an address.

SIGNATURE:

Jim Gerbracht
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

*July 22, 1994 (305)
294-8951*

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -9 / M 9:36

DOCUMENT # F69453

(1)

1. Corporation Name

DR. JIM GERBRACHT, P.A.

Principal Place of Business

615 A UNITED ST.
KEY WEST FL 33040

Mailing Address

615 A UNITED ST.
KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 State, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 State, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

03/03/1982

3a. Date of Last Report

08/02/1994

4. FEI Number

59-2274933

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

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GERBRACHT, JIM
615 A UNITED ST.
KEY WEST FL 33040

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 fee if applicable

NOTE: Registered Agent signature required when transferring

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PST
NAME	GERBRACHT, JIM
STREET ADDRESS	615 A UNITED ST
CITY - ST - ZIP	KEY WEST FL
TITLE	D
NAME	GERBRACHT, JIM
STREET ADDRESS	615 A UNITED ST
CITY - ST - ZIP	KEY WEST FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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)(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 this 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 an attachment with an address.

SIGNATURE:

James J. Gerbracht
James J. Gerbracht

June 5, 1995 (305) 294-6111

CR2E034 (3/95)