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Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F93000004853 (8)

1. Corporation Name

YORK MANAGEMENT & RESEARCH, INC.

Principal Place of Business

1061 EAST INDIANTOWN ROAD
REYNOLDS PLAZA, STE 200
JUPITER FL 33477

Mailing Address

1061 EAST INDIANTOWN ROAD
REYNOLDS PLAZA, STE 200
JUPITER FL 33477-5110



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

10/27/1993

3a. Date of Last Report

04/23/1996

4. FEI Number

22-2229833

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. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NICHOLSON, DAVID J
C/O YORK MANAGEMENT & RESEARCH, INC.
~~SUITE 200~~
JUPITER FL 33477

81 Name

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

83 1061 E. INDIANTOWN RD, SUITE 200

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME ORTEPIO, GERARD
STREET ADDRESS 1000 DE LAGO CIR, APT. #200
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE V ☐ DELETE

NAME KESSLER, CAROL B
STREET ADDRESS 12904 PACKWOOD RD.
CITY-ST-ZIP JUNO BEACH FL

TITLE V ☐ DELETE

NAME NICHOLSON, LEEANNE S
STREET ADDRESS 1060 LAKESHORE DR APT. #204
CITY-ST-ZIP LAKE PARK FL

TITLE PST ☐ DELETE

NAME NICHOLSON, DAVID J
STREET ADDRESS 1061 E INDIANTOWN RD, SUITE 200
CITY-ST-ZIP JUPITER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 1061 E. Indiantown Rd. #200
1.4 CITY-ST-ZIP JUPITER FL 33477

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 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 or 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 in an attachment with an address.

SIGNATURE

[Signature]

3/9/97 541.743.6733

CR2E034 (9/96)