

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # F93000005518 (6)

1. Corporation Name

DE MORGAN INVESTMENT MANAGEMENT, INC.

APPROVED
AND
FILED

20 MAY -1 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1001 U.S. HWY. ONE, STE. 601
JUPITER FL 33477

Mailing Address

1001 U.S. HWY. ONE, STE. 601
JUPITER FL 33477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/06/1993

3a. Date of Last Report

06/20/1994

4. FEI Number

23-2544867

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 interests in under 6, 120, 999,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BARWICK, ROBERT D
1001 US HWY. ONE, STE. 601
JUPITER FL 33477

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE	PS
NAME	BARWICK, ROBERT D.
STREET ADDRESS	1001 N. US HWY. ONE, #601
CITY, ST, ZIP	JUPITER FL
TITLE	EVP
NAME	CARTER, WILLIAM J.
STREET ADDRESS	1001 N. US HWY. ONE, #601
CITY, ST, ZIP	JUPITER FL
TITLE	VPFT
NAME	WILLS, TRACY M.
STREET ADDRESS	1001 N. US HWY. ONE, #601
CITY, ST, ZIP	JUPITER FL
TITLE	AS
NAME	MONTGOMERY, MARY E.
STREET ADDRESS	1001 N. US HWY. ONE, #601
CITY, ST, ZIP	JUPITER FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CHAIRMAN, PRESIDENT & SECRETARY	☒ 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	TREASURER	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE	Delete	☒ 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 3.19 (07)(b)(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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tracy M Wills

4/24/95

407/747-0880