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

PROFIT CORPORATION **ANNUAL REPORT**

1997

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000002927 (0)

STUART MANAGEMENT CORPORATION

Principal Place of Business Mailing Address BIB S. FEDERAL HIGHWAY **B19 8. FEDERAL HIGHWAY** SUITE 203 SUITE 203 STUART FL 34994-2952 STUART FL 34994-2952 3. Date Incorporated or Qualified 3a. Date of Last Report 06/16/1995 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 61-1044839 Not Applicable 21 26 Suito, Apt #, etc. \$8.75 Additional Sulte, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 JOHNSON, RICHARD D Mark Brechbill 819 S. FEDERAL HWY., STE 203 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994-2952 506 5. Federal Hwy. - Suite 202 83 City Stuart 84 Zip Code 3 **५ १ ५** 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 Torida 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. MARK BRECHBILL CRA SIGNATURE ed agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS Addition PCD DELETE Change 11 TITLE TITLE JOHNSON, RICHARD D NAME 1.2 NAME 1417 RIVERSIDE DRIVE 1.3 STREET ADDRESS STREET ADDRESS STUART FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition VDST 2.1 TITLE TITLE BRECHBILL, MARK 2.2 NAME 508 S. FEDERAL HIGHWAY, STE 202 STREET ADDRESS 2.3 STREET ADDRESS STUART FL 2 4 CITY+ ST- ZIE CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change ___ Addition DELETE 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TI11€ TITLE 5.2 NAME

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 eath; 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.

6.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

6.1 TITLE

6.2 NAME

DELETE

11/10/07

Change

Addition

FILED

Jun 09 1997 8:00am

Secretary of State