

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 11 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H04108

(7)

1. Corporation Name

BRUNO CONSULTING CO. INC.

Principal Place of Business

PSC 108 BOX 56
APO AE 09842
US

Mailing Address

PSC 108 BOX 56
% AMERICAN EMBASSY-ATHENS
APO AE 09842
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/18/1984

3a. Date of Last Report

04/18/1994

2. Principal Place of Business

21 Inactive

22a. Mailing Address AS OF 8/15/95

26 UNIT 2501

4. FEI Number

59-2420382

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 C/O MARILYN BRUNO-FLYNN

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23

28 APO AA

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip Country

Zip Country

24

25

29 34020

30

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FORD, CAMPBELL ESQ.
OSBORNE MCNATT SHAW
223 WATER STREET #1400
JACKSONVILLE FL 32202

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

BRUNO, MARILYN J

STREET ADDRESS

PSC 108 BOX 56

CITY - ST - ZIP

APO AE

1. TITLE

☒ Change ☐ Addition

12. NAME

BRUNO-FLYNN, MARILYN J as of 8/15/95

13. STREET ADDRESS

UNIT 2501

14. CITY - ST - ZIP

APO AA 34020

21. TITLE

☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

31. TITLE

☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY - ST - ZIP

41. TITLE

☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY - ST - ZIP

51. TITLE

☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY - ST - ZIP

61. TITLE

☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. 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 110.07(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 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:

Marilyn J. Bruno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-95

Date

Signature From 8

011-301-721-2951