2002 Uniform Business Report (UBR)

Apr 16, 2002 8:00 am Secretary of State DOCUMENT # H62131 1. Entity Name 04-16-2002 90094 027 ***150.00 FRANKLIN EQUITIES CORPORATION Principal Place of Business Mailing Address 3250 SO. OCEAN BLVD. P O BOX 871 PALM BEACH FL 33480 PALM BEACH FL 33480 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-255 1889 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BROMLEY, RICHARD S** Street Address (P.O. Box Number is Not Acceptable) 3250 SQ. OCEAN BLVD. PALM BEACH FL 33480 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE D 💸 CR2E034 (9/01 ☐ Delete TITLE Addition **BROMLEY, RICHARD** NAME NAME STREET ADDRESS 3250 S.OCEAN BLVD. STREET ADDRESS CITY-ST-ZIP PALM BEACH FL 33480 CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME BROMLEY, MICHAEL NAME STREET ADDRESS STREET ADDRESS 3250 S OCEAN BLVD CITY-ST-ZIP PALM.BEACH.FL 33480 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME **BROMLEY, GABRIELLE** NAME STREET ADDRESS STREET ADDRESS 3250 S OCEAN BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 ☐ Delete TITLE TITLE ☐ Change Addition NAME BROMLEY, STEPHEN E NAME STREET ADDRESS STREET ADDRESS 3250 S OCEAN BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I 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 report or suppliemental 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 11 or Block 12 if changed, or on an attac

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Addition