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Apr 04 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 # J05242 (9)  
1. Corporation Name  
BROWN BROTHERS HARRIMAN TRUST COMPANY OF FLORIDA



Principal Place of Business  
SUITE 310  
4501 TAMiami TRAIL NORTH  
NAPLES FL 33940

Mailing Address  
SUITE 310  
4501 TAMiami TRAIL NORTH  
NAPLES FL 34103-3080

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/19/1986	3a. Date of Last Report 03/30/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-3349874	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

Not required pursuant to Section 607.0501(2) Florida Statutes

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

Signature, Typed or Printed Name of Registered Agent and Title if Applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	1.1 TITLE	DP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BERRIS, BRIAN A	1.2 NAME	John F. King
STREET ADDRESS	21 MOUNTAIN WOOD DRIVE	1.3 STREET ADDRESS	16 West Drive
CITY - ST - ZIP	GREENWICH CT 06830	1.4 CITY - ST - ZIP	Plandome, New York 11030
TITLE	DP <input type="checkbox"/> DELETE	2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSON, JOHN C.	2.2 NAME	
STREET ADDRESS	19 ROLAND DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	SHORT HILLS NJ 07078	2.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'NEIL, DANIEL C.	3.2 NAME	
STREET ADDRESS	704 PINE CREEK LANE	3.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 33963	3.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DILLON, GEORGE S.	4.2 NAME	
STREET ADDRESS	4817 S. LAKE DR.	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL 33436	4.4 CITY - ST - ZIP	
TITLE	VTS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, EDWARD J	5.2 NAME	
STREET ADDRESS	8 MARIA CT.	5.3 STREET ADDRESS	
CITY - ST - ZIP	HUNTINGTON STATION NY 11746	5.4 CITY - ST - ZIP	
TITLE	DV <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINER, BRUCE, M	6.2 NAME	
STREET ADDRESS	7087 MILL RUN CIRCLE	6.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 34103	6.4 CITY - ST - ZIP	34109

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward J. Williams March 26, 1997  
Secretary/Treasurer

(212) 493-8350

Date

Daytime Phone

CR2E034 (9/96)

**CONTINUATION #12**

Brandimarte, Mary  
Peaper, Victoria W.  
McCartney, Douglas  
Meyer, Carolyn K.

V 48 Cheever Place  
V 105 Angelfish Lane  
V \*118 Arrandale Road  
TO 1240 Pompei Lane

Brooklyn, NY 11231  
Juplter, FL 33477  
Rockville Centre, NY 11570  
Naples, FL 33940

\*Change

joe:ann.rpt