

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

1062

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J17269

(8)

1. Corporation Name

MILDRED VARE PEACOCK, INC.

Principal Place of Business

P O BOX 4337  
VERO BEACH FL 32964

Mailing Address

P O BOX 4337  
VERO BEACH FL 32964

FILED

57 AUG 22 AM 11:00

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/02/1986

3a. Date of Last Report

04/29/1996

4. FEI Number

59-2695261

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

TERRY, IDA PEACOCK  
756 BEACHLAND BLVD SUITE B  
SUITE 208  
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

000002277170--3  
-08/26/97--01020--017  
\*\*\*\*165.00 \*\*\*\*165.00  
FL 85 21-0000

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

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
PEACOCK, O.L., JR.  
46 BRAY'S ISLAND ROAD  
SHELDON SC

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVS  
TERRY, IDA PEACOCK  
400 COCONUT PALM RD  
VERO BCH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ 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 ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ 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 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 REQUIRED

8/11/97

(571) 231-7038

CR2E034 (4/97)

208

**POHL & SHORT, P.A.**

ATTORNEYS AT LAW

DWIGHT I. (IKE) COOL  
THOMAS F. DIORIO  
GARY A. FORSTER  
E. GIVENS GOODSPEED  
MARK A. GRIMES  
DAVID J. KOHS  
FRANK L. POHL  
JAMES E. SHEPHERD, V  
HOUSTON E. SHORT  
JOHN R. SIMPSON, JR.  
NORMA STANLEY

MAILING ADDRESS:  
POST OFFICE BOX 3208  
WINTER PARK, FLORIDA 32790

COURIER ADDRESS:  
280 WEST CANTON AVENUE, SUITE 410  
WINTER PARK, FLORIDA 32789

TELEPHONE (407)647-7645  
FAX (407)647-2314

August 20, 1997

Annual Reports Filings  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

Re: Peacock Fruit & Cattle Corporation  
Waterway Crossing, Inc.  
Mildred Vare Peacock, Inc.  
Union Holding Corporation

Gentlemen:

I enclose the 1997 Corporation Annual Report for each of the four above-referenced corporations together with filing fee of \$165 for each of the Annual Reports.

Please note that the original Annual Reports were never received by these corporations therefore were not timely filed as in past years. Only upon receipt of the Second Notice did these corporations realize that the Annual Report had not been timely filed. Accordingly, I hereby request that you waive the late fee and accept the regular fee of \$165 which is attached to each Annual Report.

Thank you for your assistance.

Sincerely,

  
John R. Simpson, Jr.

JRS:eep  
Enclosure  
cc: Ida Peacock Terry