

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

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Apr 11 1997 8:00am  
Secretary of State

|  |   |  |
|--|---|--|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1997 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # J36846 (0)

1. Corporation Name

SOUTHERN AUCTIONEERS OF AMERICA, INC.



Principal Place of Business

% ROBERT J. LOWE  
4949 NORTH A1A, #131  
FT. PIERCE FL 34949

Mailing Address

% ROBERT J. LOWE  
4949 NORTH A1A, #131  
FT. PIERCE FL 34949-8235

3. Date Incorporated or Qualified

10/06/1986

3a. Date of Last Report

07/03/1996

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-3214764

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

LOWE, ROBERT J.  
4949 NORTH A1A  
#131  
FT. PIERCE FL 34949-8826

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DP  
LOWE, ROBERT J.  
4949 NORTH A1A, #131  
FT. PIERCE FL

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
GREEN, MIKE  
5610 EAGLE WAY  
MERRIT ISLAND FL 32953

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
STD  
LOWE, SHARON  
4949 NORTH A1A, #131  
FT. PIERCE FL

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

11 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0473693

CR2E034 (9/96)