FILE NOW: FILING FEE AFTER MAY 1 IS \$2.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Sandra B. Mortha

STATE

Secretary of Stat DIVISION OF CORPORATIONS

1996

J49606 **DOCUMENT #** 1. Corporation Name

(3)

DIVERSIFIED PROPERTY MANAGEMENT OF BREVARD, INC.

Principal Place of Business 1608 SUNNY BROOK LANE 107 NE

PALM BAY FL 32905

Mailing Address

1608 SUNNY BROOK LANE 107 NE PALM BAY FL 32905



								3. Date Incorporated or C	Jualified	3a. Date	of Last Re	port	
								12/31/1986		0:	3/02/199) 5	
2. Principal P	icipal Place of Business			2a. Mailing Address				4. FEI Number		· · · · · · · · · · · · · · · · · · ·	F	pplied For	
21			26	26				59-2751016 Not Applic				lot Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status De	sired		\$8.75 Additional Fee Required		
City & Stat	te		(ity & State				6. Election Campaign Fina	ancing		\$5.00	May Be	
3			28					Trust Fund Contribution	n		Addec	to Fees	
Zφ	Country Zip					Country		8. This corporation has lia		itangible ta	x under s	199.032,	
4	25 29							Florida Statutes		□ No			
	9. Name a	and Address of Curr	rent Registe	red Agent				10. Name and Address of	of New Re	gistered /	Agent		
						81	Name						
JARVI, BRADLEY 1633 SUNNY BROOK LANE #H202 PALM BAY FL 32905						82	Street Addr	ress (P.O. Box Number is Not Acceptable)					
						83							
						84 City					les 7ir	Code	
						54	City			FL	85 Zip	- 0000	
11. Pursuant	to the provisio	ns of Sections 607.09	502 and 607.	1508, Florida Statu	tes, the	above ·	named corpoi	ration submits this statement for	or the purp	ose of cha	inging its re	gistered office	
or registe familiar w	ered agent, or t vith, and accen	ooth, in the State of Fl It the obligations of S	Iorida. Such c lection 607.05	rhange was authori. i05. Florida Statute	zed by ti s	ne corp	oration's boa	rd of directors. I hereby accep	t the appo	intment as	registerea	agent. i am	
	viting biller bibook.	t the congulation of a											
SIGNATURE	Signature, typical of	r printed name of registered as	gendadu title if app	Hable (V	Oft.: Regist	tered Agor	it signature require	d when reinstating)		DATE			
12.		OFFICERS.	AND DIRECT	ORS	1	13.		ADDITIONS/CHANGES	TO OFFI	CERS AND	DIRECTO	RS IN 12	
TILLE	DV			□ DELETE	1	L 1 TOTLE					Change	Addition	
NAME	BUCHW	/EITZ, MARK			1	L2 NAME							
STREET ADORESS	A A A A A A A A A A A A A A A A A A A				1	1.3 STREET ADDRESS							
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1:1EF	D	312. July 1 1 1		DELETE	2	1 TITLE					Change	Addition	
NAM:	MELTON	MELTON, VIDA			221								
STREET ADDRESS		UNNYBROOK LAN	Ē			23 STREET ADDRESS							
C 14-81-7P	PALM B		_		2	24 CHTY - 9	ST - ZIP						
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carrily that the information inflored of the same report or supporting antical report is the and about a single factor of the receiver of the corporation or the receiver or these empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Brock 13 if changed, or on an attachment with paralleress.

NAME OF SIGNING OFFICER OR DIRECTOR