

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

FILED
Apr 30 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 # J53041 (6) 1. Corporation Name S & S REAL ESTATE DEVELOPMENT, INC.		



Principal Place of Business 400 HIGH POINT DRIVE, SUITE #500 COCOA FL 32926	Mailing Address 400 HIGH POINT DRIVE, SUITE #500 COCOA FL 32926-6861
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/20/1987	3a. Date of Last Report 04/30/1996
				4. FEI Number 59-2751366	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 SHERIFF, F. A. 400 HIGH POINT DRIVE #500 COCOA FL 32926				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	
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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	PD	1.1 TITLE	Bd. Vice Chrmn./Dir.
NAME	SHERIFF, F. A.	1.2 NAME	Sheriff, F.A.
STREET ADDRESS	400 HIGH POINT DRIVE	1.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP	COCOA FL	1.4 CITY-ST-ZIP	Cocoa, FL
TITLE	VD	2.1 TITLE	Bd. Chrmn./Dir.
NAME	SIMPKINS, B.W.	2.2 NAME	Simpkins, B.W.
STREET ADDRESS	400 HIGH POINT DRIVE	2.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP	COCOA FL	2.4 CITY-ST-ZIP	Cocoa, FL
TITLE	S	3.1 TITLE	Vice Pres./Treas.
NAME	LEBLANC, MICHAEL J.	3.2 NAME	LeBlanc, Michael J.
STREET ADDRESS	400 HIGH POINT DR	3.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP	COCOA FL	3.4 CITY-ST-ZIP	Cocoa, FL
TITLE		4.1 TITLE	Pres./Dir.
NAME		4.2 NAME	Thomas A. Vani
STREET ADDRESS		4.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Cocoa, FL
TITLE		5.1 TITLE	Secretary
NAME		5.2 NAME	Laura M. Moffett
STREET ADDRESS		5.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Cocoa, FL
TITLE		6.1 TITLE	Asst. Secretary
NAME		6.2 NAME	Eileen S. LePorin
STREET ADDRESS		6.3 STREET ADDRESS	400 High Point Drive
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Cocoa, FL

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 _____ DATE 4/30/97 1407-136-0202

CR2E034 (9/96)

Cont'd. on next pg.

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Page 2

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ANNUAL REPORT
1997



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

DOCUMENT # J53041 (6)
1. Corporation Name
S & S REAL ESTATE DEVELOPMENT, INC.



Principal Place of Business Mailing Address
400 HIGH POINT DRIVE, SUITE #500 400 HIGH POINT DRIVE, SUITE #500
COCOA FL 32926 COCOA FL 32926-6661

3. Date Incorporated or Qualified 01/20/1987 3a. Date of Last Report 04/30/1996
4. FEI Number 59-2751368 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent

SHERIFF, F. A.
400 HIGH POINT DRIVE
#500
COCOA FL 32926

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

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	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	☐ Change ☒ Addition
1.2 NAME	Jill Simpkins Crouch	
1.3 STREET ADDRESS	400 High Point Drive, Ste. 500	
1.4 CITY-ST-ZIP	Cocoa, FL	
2.1 TITLE	Director	☐ Change ☒ Addition
2.2 NAME	Janet Simpkins Jakubcin	
2.3 STREET ADDRESS	400 High Point Drive, Ste. 500	
2.4 CITY-ST-ZIP	Cocoa, FL	
3.1 TITLE	Director	☐ Change ☒ Addition
3.2 NAME	Catherine Sheriff Goshorn	
3.3 STREET ADDRESS	400 High Point Drive, Ste. 500	
3.4 CITY-ST-ZIP	Cocoa, FL	
4.1 TITLE	Director	☐ Change ☒ Addition
4.2 NAME	Denise Sheriff Porter	
4.3 STREET ADDRESS	400 High Point Drive, Ste. 500	
4.4 CITY-ST-ZIP	Cocoa, FL	
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		

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