

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED
95 FEB 22 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001412978
-02/23/95--01010--022
*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 01/21/1987	3a. Date of Last Report 03/10/1994
4. FEI Number 59-2762422	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$0.75 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	

DOCUMENT # J53511 (8)
1. Corporation Name
THE VININGS, INC.

Principal Place of Business 6400 CONGRESS AVE SUITE #2000 BOCA RATON FL 33487-2810	Mailing Address 6400 CONGRESS AVE SUITE #2000 BOCA RATON FL 33487-2810
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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9. Name and Address of Current Registered Agent

**BRYANT, BRAD D.
6400 CONGRESS AVENUE, SUITE 2000
BOCA RATON FL 33487**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

I, 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 registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	TERWILLIGER, J. RONALD	1.2 NAME	
STREET ADDRESS	2859 PACES FERRY RD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA GA	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	BRYANT, BRAD	2.2 NAME	
STREET ADDRESS	6400 CONGRESS AVE.	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☒ Change ☐ Addition
NAME	GROW, TRAMMELL G.	3.2 NAME	
STREET ADDRESS	2001 ROSS AVE.	3.3 STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	WHEELER, CHRIS	4.2 NAME	
STREET ADDRESS	6400 CONGRESS AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	4.4 CITY - ST - ZIP	
TITLE	AS	5.1 TITLE	☐ Change ☐ Addition
NAME	FISH, DEBORAH	5.2 NAME	
STREET ADDRESS	6400 CONGRESS AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 recorder or trustee empowered to execute this report as required by Chapter 007, 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)

Deborah C. Fish, Assistant Secretary

2/10/95

Date

4071977-9700

Signature Number