Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **J99826**

1. Corporation Name

SOUTHERN WAREHOUSE OF BREVARD, INC.

Country

9. Name and Address of Current Registered Agent

25

Principal Place of Business								
4316 FORTUNE PLACE								
MELBOURNE BEACH FL 32904								

2. Principal Place of Business

HEALY, PATRICK

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

4316 FORTUNE PLACE MELBOURNE BEACH FL 32904

FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90001 005 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

10/21/1987

59-2853281

4. FEI Number

700 S. BABCOCK ST. SUITE #400 MELBOURNE FL 32902				Street Add	dress (P.O. Box Number is Not Acceptable	=)		
							· -	
							85 Zip	Code
			84	City		FL	85 ZIP	Code
11. Pursuant	to the provisions of Sections 607.0502 and 60	7.1508, Florida Statutes	s, the above	e-named cor	poration submits this statement for the pu	rpose of	changing it	s registered
office or n	egistered agent, or both, in the State of Florid m familiar with, and accept the obligations of,	a. Such change was aut	thorized by	the corporat	ion's board of directors. I hereby accept t	ne appoin	imeni as r	egistered
=	in terminal with, and accept the obligations of,						•	
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: F	Registered Ager	nt signature requi	red when reinstating)	DATE		
12. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFIC	CERS AN		
TITLE	DPT	☐ DELETE	1.1 TITLE				Change	Addition
NAME	NABERHAUS JR., ROBERT J.		1.2 NAME					
STREET ADDRESS	350 AMBERJACK PLACE SO.		1.3 STREE	TADDRESS				Ì
CITY-ST-ZIP	MELBOURNE BEACH FL		1.4 CITY-S	T-ZIP				
TITLE	VPS	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	NABERHAUS, DIANE L		2.2 NAME					
STREET ADDRESS	350 AMBERJACK PLACE S		2.3 STREE	TADDRESS				
CITY-ST-ZIP	MELBOURNE BEACH FL		2.4 CITY-S	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	TADORESS				
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAMÉ					
STREET ADDRESS			4.3 STREE	TADORESS				1
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY- \$	T-ZIP				
TITLE		[]] DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME	ļ				
STREET ADDRESS			6.3 STREE	TADDRESS				į
CITY-ST-ZIP			6.4 CITY- 9	T-ZIP				
14 I horoby o	pertify that the information supplied with this file	ing does not qualify for	the exempt	ion stated in	Section 119.07(3)(i), Florida Statutes. I fe	urther cert	ify that the	information
indicated	on this annual report or supplemental annual	report is true and accur	ate and tha	t my signatu	re shall have the same legal effect as if m	ade unde	r oath; tha	tiam an

Country

Name

30

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, with all other like empowered.

