

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

APPROVED
AND
FILED

1997 MAR 21 PM 12: 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **K84616** (7)

1. Corporation Name
FIRESTONE AND ASSOCIATES, INC.

Principal Place of Business
**831 VILLAGE BLVD. SUITE 905
WEST PALM BEACH FL 33409
US**

Mailing Address
**831 VILLAGE BLVD. SUITE #905
WEST PALM BEACH FL 33409-1939
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
05/02/1989

3a. Date of Last Report
04/29/1996

4. FEI Number
65-0127729

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

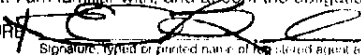
9. Name and Address of Current Registered Agent

**SIMPSON, LARRY D
1102 NORTH GADSDEN STREET
TALLAHASSEE FL 32303**

10. Name and Address of New Registered Agent

81 Name **Edwin F. Blanton, Esq.**
82 Street Address (P.O. Box Number is Not Acceptable)
825 Thomasville Road
83 **Tallahassee, FL 32303**
84 City **FL** 85 Zip Code **32303**

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

EDWIN F. BLANTON

3/21/97

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D FIRESTONE, MURRAY**
STREET ADDRESS **1512 BREAKERS WEST BLVD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ DELETE
NAME **D TWOHY, MARY JO**
STREET ADDRESS **1512 BREAKERS WEST BLVD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ DELETE
NAME **D TINI, YOLANDA**
STREET ADDRESS **34 GREENSWARD**
CITY-ST-ZIP **CHERRY HILL NJ**

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

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 

Murray Firestone

3/16/97 (107) 225-1000

CR2E034 (9/96)