

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K91395** (9)

1. Corporation Name

TREES OF DELRAY, INC.



Principal Place of Business

Mailing Address

% JAMES O. BIRR, JR.
2881 E. OAKLAND PARK BLVD., SUITE 300
FT LAUDERDALE FL 33306

% JAMES O. BIRR, JR.
2881 E. OAKLAND PARK BLVD., SUITE 300
FT LAUDERDALE FL 33306

3. Date Incorporated or Qualified
05/26/1989

3a. Date of Last Report
04/21/1995

2. Principal Place of Business
21 2101 North Andrews Avenue

2a. Mailing Address
26 2101 North Andrews Avenue

4. FEI Number
65-0152366

Applied For
Not Applicable

22 Suite 200

27 Suite 200

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

23 Fort Lauderdale, Florida

28 Fort Lauderdale, Florida

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24 33311 25 USA

29 33311 30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIRR, JAMES O., JR.
2881 E. OAKLAND PARK BLVD.
SUITE 300
FT LAUDERDALE FL 33306

81 Name
Birr, James O., Jr.
82 Street Address (P.O. Box Number is Not Acceptable)
2101 North Andrews Avenue
83 Suite 200
84 City
Fort Lauderdale, FL 85 Zip Code
33311

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

James O. Birr, Jr.

4/17/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETE
NAME BIRR, JAMES O. JR.
STREET ADDRESS 2881 E OAKLAND PARK BLVD STE 300
CITY-ST-ZIP FT LAUDERDALE FL

1.1 TITLE PT ☒ Change ☐ Addition
1.2 NAME Birr, James O., Jr.
1.3 STREET ADDRESS 2101 North Andrews Avenue, Suite 200
1.4 CITY-ST-ZIP Fort Lauderdale, Florida 33311

TITLE S ☐ DELETE
NAME BIRR, ANN L.
STREET ADDRESS 2881 E OAKLAND PARK BLVD. STE 300
CITY-ST-ZIP FT LAUDERDALE FL

2.1 TITLE S ☒ Change ☐ Addition
2.2 NAME Birr, Ann L.
2.3 STREET ADDRESS 2101 North Andrews Avenue, Suite 200
2.4 CITY-ST-ZIP Fort Lauderdale, Florida 33311

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

James O. Birr, Jr.

4/17/96

(954) 561-5800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)