**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**
**AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)**

PROFIT CORPORATION ANNUAL REPORT
**1995**

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

**FILED**
**SECRETARY OF STATE**
**DIVISION OF CORPORATIONS**
**95 JUN 29 AM 8:31**

DOCUMENT # **L00137** **(4)**

1. Corporation Name
**BRADCO TRUST, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| % J.F. LEONARD<br>10420 LEM TURNER ROAD<br>JACKSONVILLE FL 32218 | % J.F. LEONARD<br>10420 LEM TURNER ROAD<br>JACKSONVILLE FL 32218 |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/05/1989
3a. Date of Last Report: 01/19/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 c/o Rowe and Rowe, P.A. | 26 c/o Rowe and Rowe, P.A. |
| Suite, Apt. #, etc.<br>22 9471 Baymeadows Road Suite 203 | Suite, Apt. #, etc.<br>27 9471 Baymeadows Road Suite 203 |
| City & State<br>23 Jacksonville, FL | City & State<br>28 Jacksonville, FL |
| Zip<br>24 32256 | Zip<br>29 32256 |
| County<br>25 Duval | County<br>30 Duval |

4. FEI Number: 59-2959085 ☐ 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 files jointly 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 |
|---|---|
| LEONARD, J.F.<br>10420 LEM TURNER ROAD<br>JACKSONVILLE FL 32218 | 81 Name: Rowe and Rowe, P.A.<br>82 Street Address (P.O. Box Number is Not Acceptable): 9471 Baymeadows Road Suite 203<br>83<br>84 City: Jacksonville FL 85 Zip Code: 32256 |

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: Rowe and Rowe, P.A. By: R. Lee Rowe, III, Vice President DATE: 06/20/95
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | D | 11 TITLE | ☐ Change ☐ Addition |
| NAME | BRADDOCK, WILLIAM R. | 12 NAME | |
| STREET ADDRESS | 14400 BRADDOCK ROAD | 13 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL | 14 CITY-ST-ZIP | |
| TITLE | | 21 TITLE | ☐ Change ☐ Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY-ST-ZIP | | 24 CITY-ST-ZIP | |
| TITLE | | 31 TITLE | ☐ Change ☐ Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY-ST-ZIP | | 34 CITY-ST-ZIP | |
| TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY-ST-ZIP | | 44 CITY-ST-ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | |

CR2E034 (3/95)

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)(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: William R. Braddock 6/6/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

0126202 FP