

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State
1995

DOCUMENT # L17033 (6)

DUNHILL PROFESSIONAL SEARCH OF MIAMI, INC.

240 CRANDON BLVD
SUITE 115
KEY BISCAIYNE FL 33149
US

240 CRANDON BLVD
SUITE 115
KEY BISCAIYNE FL 33149
US

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification	3a. Date of Last Report
09/20/1989	07/01/1994
4. F.E.I. Number	Applied For
65-0158480	Not Applicable
5. Coordinator 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 the Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. City	26. City
22. State	27. State
23. Zip	28. Zip
24. Country	29. Country
25. Other	30. Other

9. Name and Address of Current Registered Agent

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE
7TH FLOOR
MIAMI FL 33133

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of the new (2011 and 2012) Florida Statutes, the above named corporation solemnly states this statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors, officers, or agent the appointment as registered agent. I am hereby giving notice to the public of this change.

12. OFFICERS AND DIRECTORS

NAME	POSITION
PARSONS, CHARLES	PST
240 CRANDON BLVD., #115	
KEY BISCAIYNE FL	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

NAME	POSITION	Change	Addition
PARSONS, CHARLES	PST	☐	☐
240 CRANDON BLVD., #115		☐	☐
KEY BISCAIYNE FL		☐	☐

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law 2011 (2012) Florida Statutes. Further, I certify that the information is included on the original report or supplemental annual report of this corporation and that my signature shall have the same legal effect as if made under oath. That any person who is a director or officer of the corporation or the person or persons responsible for the preparation of this report as required by Chapter 2011, Florida Statutes, and that my name appears on the back of the report or supplemental report with an address.

SIGNATURE: *Charles E. Parsons* CHARLES E. PARSONS 4/7/95 1305/365-0400

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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L18060** (8)

1. Corporation Name

BARRIER ISLAND DEVELOPMENT, CORPORATION

Principal Place of Business

Mailing Address

101 GEORGE KING BLVD. #4
P.O. BOX 1441
CAPE CANAVERAL FL 32920

101 GEORGE KING BLVD. #4
P.O. BOX 1441
CAPE CANAVERAL FL 32920

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **09/21/1989** 3a. Date of Last Report **06/16/1994**

4. FEI Number **59-2974637** Applied For ☐ Not Applicable ☐

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

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

8. This corporation has liability for damages for under \$100,000 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 State Apt # etc

26 State Apt # etc

22 City & State

27 City & State

23

28

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCPHILLIPS, MICHAEL F.
101 GEORGE KING BLVD. #4
CAPE CANAVERAL FL 32920

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of law, 1977, 1902 and 1907, 1908 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 law for 1907-1908 Florida Statutes.

SIGNATURE

(Signature of Agent or Registered Agent for Change of Agent)

(Signature of New Agent or Registered Agent for Change of Agent)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	PST
NAME	BOND, MORGAN LEE
STREET ADDRESS	101 GEORGE KING BLVD. #4
CITY, STATE, ZIP	CAPE CANAVERAL FL
NAME	D
NAME	BOND, MORGAN LEE
STREET ADDRESS	101 GEORGE KING BLVD. #4
CITY, STATE, ZIP	CAPE CANAVERAL FL
NAME	VD
NAME	MCPHILLIPS, MICHAEL F.
STREET ADDRESS	101 GEORGE KING BLVD. #4
CITY, STATE, ZIP	CAPE CANAVERAL FL
NAME	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law for 1907-1908 Florida Statutes. I further certify that the information submitted 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 each officer or director of the corporation or the officer or trustee empowered to execute this report as required by chapter 600, Florida Statutes, used that the names appears in Block 12 or Block 13 is changed, or is an attachment with an address.

SIGNATURE:

Michael McPhillips
SIGNATURE AND PRINTED NAME OF REGISTERED AGENT OR DIRECTOR
Michael McPhillips

4/25/95

407-799-4090