

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L45437** (5)

1. Corporation Name

INGHAM & COMPANY



Principal Place of Business

**1570 MADRUGA AVE., SUITE 400
CORAL GABLES FL 33146**

Mailing Address

**1570 MADRUGA AVE., SUITE 400
CORAL GABLES FL 33146**

3. Date Incorporated or Qualified

01/26/1990

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0170152

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

**INGHAM, KENNETH G.
1570 MADRUGA AVE
4TH FLOOR
CORAL GABLES FL 33146**

10. Name and Address of New Registered Agent

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 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 in full (Name, Street, City, State, Zip)

Name, Street, City, State, Zip (Agent's name and address required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

☐ DELETE

NAME

**PDC
INGHAM, KENNETH G.
1570 MADRUGA AVE. 4TH FL
CORAL GABLES FL**

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

**VT
EICHBERG, MARC
1570 MADRUGA AVE 4TH FL
CORAL GABLES FL**

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

**VS
INGHAM, LINDA
1570 MADRUGA AVE. 4TH FL
CORAL GABLES FL**

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

**V
ANDERTON, GEORGE E.
1570 MADRUGA AVE. 4TH FL
CORAL GABLES FL**

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

33146

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

33146

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

33146

4.1 TITLE

☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

33146

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

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, as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/96 (305) 662-5557

CR2E034 (12/95)