FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **L53076** **(0)**

1. Corporation Name

POSSUM PROPERTIES, INC.

Principal Place of Business	Mailing Address
2865 EXECUTIVE CENTER DRIVE C/O COPPERWHEAT, JACQUELYN CLEARWATER FL 34622 US	2865 EXECUTIVE CENTER DRIVE C/O COPPERWHEAT, JACQUELYN CLEARWATER FL 34622 US

2. Principal Place of Business: 21 2865 Executive Drive
Suite, Apt. #, etc 22
City & State 23
Zip 24 Country 25

2a. Mailing Address: 26 2865 Executive Drive
Suite, Apt. #, etc 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualified: 02/23/1990
3a. Date of Last Report: 03/29/1995
4. FEI Number: 59-3020092 ☐ 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

RICE, MARTIN ERROL
696 FIRST AVE N SUITE 400
ST PETERSBURG FL 33701

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 ________ DATE ________

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	RISSER, P.N. III	
STREET ADDRESS	2865 EXEC. CENTER DRIVE	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	S	☐ DELETE
NAME	COPPERWHEAT, JACQUELYN M	
STREET ADDRESS	2865 EXECUTIVE CNTR DR	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	2865 Executive Drive	
1.4 CITY-ST-ZIP	Clearwater, FL 34622	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	2865 Executive Drive	
2.4 CITY-ST-ZIP	Clearwatee, FL 34622	
3.1 TITLE	V	☐ Change ☒ Addition
3.2 NAME	Mitchell, Bruce	
3.3 STREET ADDRESS	2865 Executive Drive	
3.4 CITY-ST-ZIP	Clearwatee, FL 34622	
4.1 TITLE	V	☐ Change ☒ Addition
4.2 NAME	KAtchuk, Kerry	
4.3 STREET ADDRESS	2865 Executive Drive	
4.4 CITY-ST-ZIP	Clearwatee, FL 34622	
5.1 TITLE	T	☐ Change ☒ Addition
5.2 NAME	Curran, John	
5.3 STREET ADDRESS	2865 Executive Drive	
5.4 CITY-ST-ZIP	Clearwatee, FL 34622	
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: Jacquelyn M Copperwheat JAcquelyn M. Copperwheat 4/18/96 (813) 573-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E034 (12/95)