

ANNUAL REPORT
1997



Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L79877

(1)

1. Corporation Name

PEASE-KERR AGENCY, INC.

Principal Place of Business

Mailing Address

C/O MYERSON MURTON
3959 PRARIE DUNES DRIVE
SARASOTA FL 34238
US

C/O MYERSON. MURTON
3959 PRAROE DUNES DRIVE
SARASOTA FL 34238-2819
US

FILED

Apr 04 1997 8:00am
Secretary of State

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/11/1990

3a. Date of Last Report

03/06/1996

4. FEI Number

65-0234234

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

BINSWANGER, JACK
5412 BENEVA WOODS CR
SARASOTA FL 34233

10. Name and Address of New Registered Agent

81

Name

Morton Myerson

82

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

3959 Prairie Dunes Dr

83

84

City

Sarasota

FL

85

Zip Code

34238

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

Morton Myerson

Signature typed or printed name of registered agent and title if applicable

Morton Myerson

(NOTE: Registered Agent Signature required when reinstating)

March 31, 1997

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SPEIR, ARMAND
STREET ADDRESS 3918 SPYGLASS HILL ROAD
CITY-STATE-ZIP SARASOTA FL

TITLE D ☐ DELETE

NAME MYERSON, MORTON
STREET ADDRESS 3959 PRARIE DUNES DR.
CITY-STATE-ZIP SARASOTA FL

TITLE D ☐ DELETE

NAME MOURAD, TIM
STREET ADDRESS 1355 S PORTIFINO DR
CITY-STATE-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-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-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing 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:

Morton Myerson

Morton Myerson

941-923-1622

Date

Daytime Phone

CR2E034 (9/96)