

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L91686

(0)

1. Corporation Name

BREMER BRACE & LIMB COMPANY



Principal Place of Business

**P.O. BOX 1150
WINTER PARK FL 32790**

Mailing Address

**P.O. BOX 1150
WINTER PARK FL 32790**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**PHILLIPS, R. PATRICK
200 N. THORNTON AVE.
ORLANDO FL 32801-2164**

81 Name

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

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified
08/02/1990

3a. Date of Last Report
03/17/1995

4. FEI Number

59-3020852

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

10. Name and Address of New Registered Agent

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 name of registered agent and date of signature

Signature typed or printed name of new registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **PHILLIPS, R. PATRICK**
STREET ADDRESS **200 N. THORNTON AVE.**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

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