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 # **L95320** **(2)**

1. Corporation Name

HORNSBY, SACHER, ZELMAN & STANTON, P.A.
d/b/a HORNSBY, SACHER, ZELMAN, STANTON, PAUL & BEILEY, P.A.

800001767618
-04/03/96--01016--010
***200.00

Principal Place of Business	Mailing Address
~~1110 BRICKELL AVE~~ ~~PENTHOUSE~~ ~~MIAMI FL 33131~~	~~1110 BRICKELL AVE~~ ~~PENTHOUSE~~ ~~MIAMI FL 33131~~

3. Date Incorporated or Qualified: 08/22/1990
3a. Date of Last Report: 01/27/1995

2. Principal Place of Business
21 1401 BRICKELL AVENUE
Suite, Apt. #, etc.
22 SUITE 700
City & State
23 MIAMI, FLORIDA
Zip 24 33131 Country 25

2a. Mailing Address
26 1401 BRICKELL AVENUE
Suite, Apt. #, etc.
27 SUITE 700
City & State
28 MIAMI, FLORIDA
Zip 29 33131 Country 30

4. FEI Number: 65-0212052 ☐ 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

LEGAL ASSETS, INC.
~~1110 BRICKELL AVENUE~~
~~PENTHOUSE~~
~~MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1401 BRICKELL AVENUE
83 SUITE 700
84 City MIAMI FL 85 Zip Code 33131

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	SACHER, BARTON S	~~1110 BRICKELL AVE PH~~	~~MIAMI FL~~	☐
DVS	STANTON, WALTER J III	~~1110 BRICKELL AVE PH~~	~~MIAMI FL~~	☐
DVT	ZELMAN, RICHARD M	~~1110 BRICKELL AVE PH~~	~~MIAMI FL~~	☐
D	HARTMAN, ROY M	~~1110 BRICKELL AVE, PH~~	~~MIAMI FL~~	☐
D	VAN SANT, NANCY	~~1110 BRICKELL AVE, PH~~	~~MIAMI FL~~	☐
D	GREIF MICHAEL T	~~1110 BRICKELL AVE PH~~	~~MIAMI FL~~	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐
2			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐
3			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐
4			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐
5			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐
6			1401 Brickell Avenue, Suite 700	Miami, Florida 33131	☒	☐

CR2E034 (12/95)

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: B. Sacher 3/25/96 (305) 371-8797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
BARTON S. SACHER, President

4-2-96