

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

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1995

5-10-95 B-6016-NIC

05 MAY 1995 11:10:35

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(9)

SECTION OF STATE
TALLAHASSEE, FLORIDA

BRECKENRIDGE & ASSOCIATES, P.A.

7019 PELICAN ISLAND DR SUITE 805 TAMPA FL 33634 US		7019 PELICAN ISLAND DR SUITE 805 TAMPA FL 33634 US	
2. Filing Jurisdiction: FLORIDA		2a. Mailing Address:	
21. State: FL		26. State: FL	
22. City: TAMPA		27. City: TAMPA	
23. Zip: 33634		28. Zip: 33634	
24. Day: 08/23/1990		29. Month: 06/03/1994	
25. Year: 1990		30. Year: 1994	
3. Date of Registration: 08/23/1990		3a. Date of Last Report: 06/03/1994	
4. FID Number: 59-3043079		Applied For: Not Applicable	
5. Continuity of Status Desired: ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution: ☐		\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under Ex. 170.03, Florida Statutes: ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent			
BRECKENRIDGE, JOHN M., JR. 7019 PELICAN ISLAND DR SUITE 805 TAMPA FL 33634			
10. Name and Address of New Registered Agent			
81. Name:			
82. Street Address (P.O. Box Number is Not Acceptable):			
83. City:			
84. State: FL 85. Zip Code:			
11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, accept the appointment as registered agent. I am authorized to accept the appointment as registered agent under Ex. 170.03, Florida Statutes.			
SIGNATURE: _____			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
14. I hereby certify that the information supplied with this filing is voluntarily furnished and ready and qualify for the exemption stated in Section 607.01, Florida Statutes. I further certify that the information included in the annual report or additional annual report is true and accurate, and that my signature shall be on the same report. I understand that my signature shall be on the report of the corporation or the officer or officers empowered to make the report as required by Chapter 607, Florida Statutes, and that my signature shall be on the report of the corporation or the officer or officers empowered to make the report as required by Chapter 607, Florida Statutes.			
SIGNATURE: <i>John M. Breckenridge Jr.</i> John M. BRECKENRIDGE JR.			