

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 # M14597 (2)

1. Corporation Name

S. CHARLES BRUGNETTI & ASSOCIATES, INC.



Principal Place of Business

47 BIRCH DRIVE
HOLLYWOOD FL 33026

Mailing Address

47 BIRCH DRIVE
HOLLYWOOD FL 33026

3. Date Incorporated or Qualified

04/29/1985

3a. Date of Last Report

03/17/1995

2. Principal Place of Business

2a. Mailing Address

47 BIRCH DR

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Hollywood FL

Zip Country

Zip Country

33026 Broward

4. FEI Number

65-0036263

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

10. Name and Address of New Registered Agent

BRUGNETTI, S. CHARLES
47 BIRCH DRIVE
HOLLYWOOD FL 33026

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

S. Charles Brugnetti, Pres.

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

(NOTE: Registered Agent signature required when reinstating)

4/22/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> DELETE |
|-------|--------------------------|------------------------|-------------------|---------------------------------|
| PD | BRUGNETTI, S. CHARLES | 47 BIRCH DRIVE | HOLLYWOOD FL | |
| VT | BRUGNETTI, ELLYN D. | 12720 VIRTUDES STREET | CORAL GABLES FL | |
| SD | BRUGNETTI, GERALDINE M. | 47 BIRCH DRIVE | HOLLYWOOD FL | |
| D | BRUGNETTI, CHRISTOPHER C | 11864 N.W. 13TH STREET | PEMBROKE PINES FL | |
| D | MCSHANE, SANDRA B. | 3600 CODY ROAD | SHERMAN OAKS CA | |
| D | BRUGNETTI, PAULA G. | 75 25 60TH STREET | GLENDALE NY | |

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-----------|----------|--------------------|---------------------|---------------------------------|-----------------------------------|
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Geraldine M. Brugnetti, Sec.

Date

4/24/96

Daytime Phone #

(954) 431-4027

CR2E034 (12/95)