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**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

# **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90136 010 \*\*\*150.00

## 1999 DOCUMENT # M15104

### Corporation Name WITHERINGTON BROKERAGE COMPANY

rincipal Place of Business

1 N.W. 37	D WITHERINGTON									
O JULIAN R. WITHERINGTON 11 N.W. 37TH AVENUE WII FL 33147		C/O JULIAN R. WITHERINGTON 6831 N.W. 37TH AVENUE MIAMI FL 33147			JE	DC	NOT WRIT	E IN THIS	SPACE	
					3. [	Date Incorporated				
					(	05/07/1985				
26		2a. Mailing Address	Address			El Number				Applied For
		<del></del>				5 <del>9-2665406</del>				Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. (	Certifcate of Status	Desired			5 Additional Required
City & Sta	te	City & State	· <u>-</u> -		6F	Election Campaign	Financino -			0 May Be
	·	28				Frust Fund Contribu				ed to Fees
Zip	Country	Zip	Cou	ntry	8. T	This corporation ow	es the curre	nt year Inta	ngible	
	25	29	30	<del> </del>		Personal Property 1			∐Yes	□No
<del></del>	9. Name and Address of Curren	t Registered Agent				Name and Addres	s of New R	egistered A	gent	
WIT	HERINGTON, JULIAN R.			81 Nam	е			•		
	1 N.W. 37TH AVENUE			82 Stree	et Address (P.C	D. Box Number is N	ot Acceptal	ole)		
	MI FL 33147					, and a second s				
1411/7			ļ	83						
				84 City					05 7	p Code
		· · · · · · · · · · · · · · · · · · ·						FL	1 1	
agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations are security to the security of the				poration's boar	rd of directors. I he	reby accept	the appoint	ment as	registered
NATURE	Signature, typed or printed name of registered agen									
		it and title if applicable. (NOTE	: Registered a	Agent signature	e required when rein-	etation)		DATE		
	OFFICERS AN		E: Registered /	Agent signature	e required when rein:		S TO OFF	CERS AND	DIRECT	ORS IN 12
						stating) DDITIONS/CHANGE	S TO OFF	CERS AND		
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I nereby 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, with all other like empowered.

**GNATURE:** '

LIA OF SIGNING OFFICER OR DIRECTOR