

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M86774** (0)

1. Corporation Name

LAIRD MANAGEMENT CORPORATION

Principal Place of Business

**231 BRADLEY PLACE
SUITE 206
PALM BEACH FL 33480
US**

Mailing Address

**231 BRADLEY PLACE
SUITE 206
PALM BEACH FL 33480
US**



2. Principal Place of Business

2a. Mailing Address

21 231 BRADLEY PLACE

26 231 BRADLEY PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 206

27 SUITE 206

City & State

City & State

23 PALM BEACH, FL

28 PALM BEACH, FL

Zip

Zip

24 33480

Country

Country

25 PALM BEACH

29 33480

30 PALM BEACH

9. Name and Address of Current Registered Agent

**LEPOW, STEPHAN A
231 BRADLEY PLACE
SUITE 206
PALM BEACH FL 33480**

81. Name

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

83.

84. City

FL

85. Zip Code

3. Date Incorporated or Qualified

06/23/1988

3a. Date of Last Report

04/28/1995

4. FEE Number

65-0059291

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 607.0508, Florida Statutes.

SIGNATURE **STEPHAN A. LEPOW, VP-FINANCE**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETED

NAME **DP
WILKINSON, GEOFF C**
STREET ADDRESS **3 ST. JAMES SQUARE**
CITY-STATE-ZIP **LONDON EN**

TITLE ☐ DELETED

NAME **OVST
LEPOW, STEPHAN A.**
STREET ADDRESS **231 BRADLEY PLACE**
CITY-STATE-ZIP **PALM BEACH FL**

TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

D

**IAN M. ARNOTT
3 ST. JAMES'S SQUARE
LONDON, ENGLAND**

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: **STEPHAN A. LEPOW**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT

Stephan Lepow, Director

13 Feb 1996

CR2E034 (12/95)