## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # M92371** 

SHAW SECURITIES, INC.

Principal Place of Business Mailing Address 4024 North Meridian Rd. 4024 NORTH MERIDIAN RD. TALLAHASSEE FL 32312 TALLAHASSEE FL 32312-1148 3. Date Incorporated or Qualified. 3a. Date of Last Report 08/03/1988 03/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2902699 21 Not Applicable Suite, Apt. # etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country Country 8. This corporation has liability for intangible tax under s. 199.032. 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHAW, FRANK, III 4024 NORTH MERIDIAN RD. 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32312 83 84 City 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 fam Sar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or ported name of registered agent and trig if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6)PD TIBLE DELETE 1.1 TITLE Change Addition NAME SHAW, FRANK, JR. 1.2 NAME 4024 N. MERIDIAN RD STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY- ST-ZIP 1.4 CITY-ST-ZIP TITLE VD DELETE 21 TITLE Change Addition NAME SHAW, SARAH 2.2 NAME 4024 N MERIDIAN RD STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-7F 2. 4 CITY - ST - ZIP TITLE VD. DELETE 3.1 TITLE Change Addition NAME HYDE, SALLY 3.2 NAME 592 FRANK SHAW DR. STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL 32312 CHY-ST-ZIP 3.4. CITY-ST-ZIP THTLE STVD DELETE 4.1 TETLE Change Addition NAVE SHAW, FRANK, III 4.2 NAME 3520 THOMASVILLE RD. 4TH FLOOR STREET ADDRESS 4.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5 1 TITLE Change Addition SHAW, FRANK, III NAME: 5.2 NAME 2281 TRESCOTT STREET ADDRESS 5.3 STREET ADDRESS tallahassee fl CITY - \$1 - 71P 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE ☐ Change \_\_\_ Addition NAMÉ 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - S1 - ZIP 64 CITY-ST-ZIP 14. I do hereby 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 Lam an officer or director of the corporation or the receiver or Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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SIGNATURE:

appears in Block 12 or Block

FILED

Jan 29 1997 8:00am

Secretary of State