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FILED

Mar 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # **N08405** (5)

1. Corporation Name

ALERT 96, INC.

Principal Place of Business

Mailing Address

**218 S. MONROE STREET
TALLAHASSEE FL 32301****218 S. MONROE STREET
TALLAHASSEE FL 32301-1624**3. Date Incorporated or Qualified
03/27/19853a. Date of Last Report
05/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.**26** Suite, Apt. #, etc.**22** City & State**27** City & State**23** Zip Country**28** Zip Country

4. FEI Number

59-2958735

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees8. 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

**CARRUTHERS SCOTT
218 S. MONROE ST
TALLAHASSEE FL 32301****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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **C/D ROSELLI, RICHARD**
STREET ADDRESS **700 SE THIRD AVENUE, STE 100**
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**1.1 TITLE **P/D** ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME **D SLAWSON, RICHARD**
STREET ADDRESS **2401 PGA BLVD, STE 140**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**2.1 TITLE **T/D** ☐ Change ☒ Addition
2.2 NAME **Liggio, Jeffrey M.**
2.3 STREET ADDRESS **213 Southern Blvd.**
2.4 CITY-ST-ZIP **West Palm Beach, FL 33405**TITLE ☐ DELETE
NAME **PSD CARRUTHERS, SCOTT**
STREET ADDRESS **218 S. MONROE ST.**
CITY-ST-ZIP **TALLAHASSEE FL 32301**3.1 TITLE **S/D** ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME **VC/T KELAHER, JAMES**
STREET ADDRESS **390 N. ORANGE AVE., STE 1500**
CITY-ST-ZIP **ORLANDO FL 32801**4.1 TITLE **V/D** ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **Roth, Neal A.**
5.3 STREET ADDRESS **2665 S. Bayshore Dr.**
5.4 CITY-ST-ZIP **Miami, FL 33133**TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Scott Carruthers **RECORDED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0007243

CR2E037 (9/96)