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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N15064

(1)

1. Corporation Name

531 REPEATER GROUP, INC.



Principal Place of Business

Mailing Address

**2425 GROVE VALLEY AVENUE
PALM HARBOR FL 34683-230
US**

**PO BOX 1791
PALM HARBOR FL 34682-794
US**

3. Date Incorporated or Qualified
05/22/1986

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ERICKSON, CURTIS G.
2425 GROVE VALLEY AVENUE
PALM HARBOR FL 34683-3230**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **RICKEL, ROBERT W.**
STREET ADDRESS **3555 DEER RUN SOUTH**
CITY-ST-ZIP **PALM HARBOR FL**

1.1 TITLE ☐ Change ☐ Addition

TITLE **V** ☐ DELETE

NAME **PETROCI, NEIL B.**
STREET ADDRESS **2179 N GRENDRIDGE PLACE**
CITY-ST-ZIP **PALM HARBOR FL**

2.1 TITLE ☒ Change ☐ Addition

TITLE **T** ☐ DELETE

NAME **ERICKSON, CURTIS G**
STREET ADDRESS **2425 GROVE VALLEY AVENUE**
CITY-ST-ZIP **PALM HARBOR FL**

2.2 NAME **Wilton, Allan R.**
2.3 STREET ADDRESS **60 Meadowlark Drive**
2.4 CITY-ST-ZIP **Safety Harbor, FL 34695**

TITLE **S** ☐ DELETE

NAME **FRIEDMAN, CARL**
STREET ADDRESS **2829 RUSTIC OAKS DR**
CITY-ST-ZIP **PALM HARBOR FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

NAME **HENSBERY, JOHN**
STREET ADDRESS **1110 MCCARTY ST.**
CITY-ST-ZIP **DUNEDIN FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

NAME **BRANDA, MICHAEL R.**
STREET ADDRESS **2972 VALENCIA LANE E**
CITY-ST-ZIP **PALM HARBOR FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Curtis Erickson
SIGNATURE OF REGISTERED AGENT OR DIRECTOR

April 5, 1996

(813) 345-8000

CR2E037 (12/95)