## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION . ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N9500005756 (0)

## GULFCOAST CORPORATE PARK OWNERS ASSOCIATION, INC

Mailing Address Principal Place of Business 1205 MANATEE AVENUE WEST 1205 MANATEE AVENUE WEST **BRADENTON FL 34205 BRADENTON FL 34205** 3a. Date of Last Report 3. Date Incorporated or Qualified 12/06/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-1055-499 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Zip Florida Statutes ☐ Yes ☐ No 29 30 25 24 10. Name and Address of New Registered Agent 9 Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) PORGES, GREGORY J 111 THIRD AVENUE WEST 83 **BRADENTON FL 34205** Zip Code 84 City 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. Gregory J. Porges, Esquire
Signature, typod or printed name of registered agent and title 4 applicable.

(NOTE: Registered Agent signature required when reinstating) SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition 1.1 TITLE DELETE TITLE PD 1.2 NAME MILLER, HUGH D NAME 1.3 STREET ADDRESS 1111 THIRD AVENUE WEST #200 STREET ADDRESS 1.4 City-ST-ZIP **BRADENTON FL 34205** CITY - ST - ZIP ■ Addition Change DELETE 21 TITLE TITLE VD. 2.2 NAME MILLER, C D NAME 2.3 STREET ADDRESS 1111 THIRD AVENUE WEST #200 STREET ADDRESS 2 4 CiTY-ST-ZIP **BRADENTON FL 34205** CITY-ST-ZIP ☐ Addition Change DELETE 3.1 TITLE TITLE STD 3.2 NAME COOPER, DEBRA NAME 3.3 STREET ADDRESS 1111 THIRD AVENUE WEST #200 STREET ADDRESS 34. CITY-ST-ZIP **BRADENTON FL 34205** 900001745259 -03/15/96--01103--005 CITY - ST - ZIP Addition DELETE 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS \*\*\*61.25 4.4 CITY-ST-ZIP CITY - ST-ZIP ☐ Addition Change DELETE 5.1 TITLE THEF 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST- ZIF DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 logal 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 chapter, or an analysis 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 logal 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 chapter, or an analysis of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hugh D. Miller

CR2E037 (12/95)