FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State
05-10-1999 90128 024 ***150.00

DOCUMENT # **P16849**

1. Corporation Name
BROTHERS PROPERTY CORPORATION

Principal Place of Business	Mailing Address
~~C/O THOMAS E. MISCHELL~~ 2699 S BAYSHORE DR. STE 800 MIAMI FL 33133 US	%MISCHELL, THOMAS. E ONE E FOURTH ST 8TH FLOOR CINCINNATI OH 45202 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 11/18/1987	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2840291	Applied For Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation owes the current year Intangible Personal Property Tax.	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LUBAN, KENNETH A.
31 OCEAN REEF DRIVE, SUITE C-300
KEY LARGO FL 33037

10. Name and Address of New Registered Agent

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 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FULLER, VICTOR L.		1.2 NAME	
STREET ADDRESS	2699 S BAYSHORE DR 800E		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LUBAN, KENNETH A.		2.2 NAME	
STREET ADDRESS	31 OCEAN REEF DR C-300		2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LINTZ, ROBERT C.		3.2 NAME	
STREET ADDRESS	ONE E. FOURTH ST.,2ND FLOOR		3.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH 45202		3.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MISCHELL, THOMAS E		4.2 NAME	
STREET ADDRESS	1 E 4TH ST., 8TH FLOOR		4.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH 45202		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	VONDERHAAR, DANIEL J		5.2 NAME	
STREET ADDRESS	ONE E FOURTH ST., 2ND FLOOR		5.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH 45202		5.4 CITY-ST-ZIP	
TITLE	VDAS	☐ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	FULLER, STEPHEN M.		6.2 NAME	
STREET ADDRESS	2699 S BAYSHORE DR 800E		6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 3313		6.4 CITY-ST-ZIP	33133

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address, with all other like empowered.

SIGNATURE: Thomas E. Mischell Vice President 4/30/99 (513) 579-2171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)

BROTHERS PROPERTY CORPORATION
DOCUMENT # P16849
1999 FLORIDA ANNUAL REPORT
ADDITIONAL DIRECTOR & OFFICERS

P16849
532206901 28·24

DIRECTOR

STEPHEN M. FULLER
2699 S. BAYSHORE DRIVE STE 800E
MIAMI, FL 33133

OFFICERS

VICE PRESIDENT & TREASURER
FRED J. RUNK
ONE EAST FOURTH STREET
CINCINNATI, OH 45202

ASSISTANT SECRETARY
MARC L. FAUST
2699 S. BAYSHORE DRIVE STE 800E
MIAMI, FL 33133

ASSISTANT SECRETARY
RONALD C. HAYES
580 WALNUT STREET
CINCINNATI, OH 45202

ASSISTANT SECRETARY
JAMES C. KENNEDY
ONE EAST FOURTH STREET
CINCINNATI, OH 45202