

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

PROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Feb 14 1997 8:00am
Secretary of State

DOCUMENT # P93000083446 (3)

1. Corporation Name

PLI MANAGEMENT CORP.



Principal Place of Business

1061 E INDIANTOWN ROAD
SUITE 310
JUPITER FL 33477
US

Mailing Address

1061 E. INDIANTOWN ROAD
SUITE 310
JUPITER FL 33477-5143
US3. Date Incorporated or Qualified
12/07/19933a. Date of Last Report
05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0458543

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

8. 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

C T CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION FL 33324

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

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 DC ☐ DELETENAME MACRICOSTAS, CONSTANTINE
STREET ADDRESS 1061 E INDIANTOWN RD STE 310
CITY-ST-ZIP JUPITER FL1.1 TITLE ☐ Change ☐ AdditionTITLE DP ☐ DELETENAME YOMAZZO, MICHAEL J
STREET ADDRESS 1061 E INDIANTOWN RD STE 310
CITY-ST-ZIP JUPITER FL1.2 NAME ☐ Change ☐ AdditionTITLE DVS ☐ DELETENAME MOONAN, JEFFREY P
STREET ADDRESS 1061 E INDIANTOWN RD STE 310
CITY-ST-ZIP JUPITER FL1.3 STREET ADDRESS ☒ Change ☐ AdditionTITLE V ☐ DELETENAME BOLLO, ROBERT J.
STREET ADDRESS 1061 E INDIANTOWN RD STE 310
CITY-ST-ZIP JUPITER FL1.4 CITY-ST-ZIP ☐ Change ☐ AdditionTITLE V ☐ DELETENAME HEILMAN, DAVID
STREET ADDRESS 601 MILLENIUM DR
CITY-ST-ZIP ALLEN TX2.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP2.2 NAME ☐ Change ☐ Addition2.3 STREET ADDRESS
2.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey P. Moonan 2-4-97 (603) 775-9000

Date

Daytime Phone #

CR2E034 (9/96)