3.4.97 B-2595 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 04 1997 8:00am Secretary of State

DOCUMENT # P9400001266 (3)

ANDREV	W L. GORDON, P.A.				E JERNING HIN MAKERING BARIN BARIN BARIN	0 000
Principal Olac	o of Rueinaec	Mailing Address		·····		
Principal Place of Business 125 HAMPTON LANE KEY BISCAYNE FL 33149		125 HAMPTON LANE KEY BISCAYNE FL 33149-1316				
RET BISONTH	11. 30143	NET DIODATHE TE U	01401010			
					 Date Incorporated or Qualified 01/03/1994 	3a. Date of Last Report 02/27/1996
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 65-0458607	Applied For
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.		05'04'00007	Not Applicable \$8.75 Additional	
22			27		5. Certificate of Status Desired	Fee Required
City & State		City & State		8. Election Campaign Financing	\$5.00 May Be	
23	28		2		Trust Fund Contribution	Added to Fees
Zipi	Country	Zip	Count	'y	8. This corporation has liability for i	
24	25] 9. Name and Address of Curr	[29] rent Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No
COF	RPORATION COMPANY OF MI		8	1 Name		
201	S BISCAYNE BLVD		[8:	2 Street Add	ress (P.O. Box Number is Not Acceptab	ie)
	TE 1600 MI FL 33131		8:	3		
(110 +	W. T. L. 00101		8-	City		85 Zip Code
				,		FL
 11. Pursuant office or r 	to the provisions of Sections 607.0 registered agent, or both, in the Sta	0502 and 607.1508, Florida S ate of Florida. Such change	Statutes, the abo was authorized b	ve-named corporation the corporation the corporation in the corporatio	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
agent. La	am familiar with, and accept the ob	oligations of, Section 607.050	5, Florida Statut	98.		
SIGNATURE	Stijn it ine, type 1 or printi d name of regieten o	anent and title it applicable	(NOTE: Flegislered A	nent signature requi	red when rainetaking	DATE
12.		AND DIRECTORS	13.	gern algricule requ	ADDITIONS/CHANGES TO OFFIC	
MILE	D	DELET	E 1.1 TITLE	T T		Change Addition
NAME	GORDON, ANDREW L		1.2 NAM	:		
STREET ADDRESS	125 HAMPTON LANE		1.3 STRE	ET ADDRESS	•	
CITY-ST-7IP	KEY BISCAYNE FL 33149		1.4 CITY-	ST-ZIP		
TITLE		[] DELET	E 2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY - ST - 7IP	De Fre		2 4 CITY			
TITLE		DELET				Change Addition
NAME DIDECT ADMINISTRATION			3.2 NAME		5.	
STREET ADDRESS				ET ADDRESS		
Crty - Sr - 74P Title		DELET	3 4. CITY E 4.1 TITLE		THE THE PERSON OF THE PERSON O	Change Addition
NAME		L. Dett.	4.2 NAM			C Change C Addition
STREET ADDRESS			•	ET ADDRESS		
CITY - SY - 7IP			4.4 CITY-			
TITLE		DELET				Change Addition
NAME			5.2 NAMI			<u> </u>
STREET ADDRESS			•	ET ADDRESS		
CITY - ST - ZIP			5.4 CITY			
TITLE		☐ D€LET			He Hitcheter Library Commission C	Change Addition
NAME			6.2 NAMI	:		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
C(1) - S* - 7IP			6,4 CITY	-ST-ZIP		
14. I do here	by certify that the information supp	olied with this filing does not	qualify for the ex	emption state	d in Section 119.07(3)(i), Florida Statute	s. I further certify that the

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:

GRATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/17 305-358-6300