

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995

[illegible]

DOCUMENT # **P94000010673 (9)**

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SEP 23 PM 2:03

TALLAHASSEE, FLORIDA

[illegible]

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF WOUNDED SELLER OR DIRECTOR

4/18/95

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **P94000011595 (3)**

1. Corporation Name

KEMPER AVIATION TRAINING CENTER, INC.

94 MAY 11 1995
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Office of Corporation
**2633 LANTANA
SUITE 18
LANTANA FL 33462**

Mailing Address
**2633 LANTANA
SUITE 18
LANTANA FL 33462**

3. Date Incorporated or Chartered
02/08/1994

3a. Date of Last Report

2. Principal Office of Corporation

2a. Mailing Address

21

26

4. FEI Number

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 funds for expenditure for under \$100,000.
Florida Statutes ☒ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KEMPER, JOSEPH
2633 LANTANA
SUITE 18
LANTANA FL 33462**

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 (b)(2) and 607 (15)(b) 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 Sections 607 (b)(2) Florida Statutes.

SIGNATURE

(Signature of Agent or Director)

(Signature of Registered Agent or Registered Agent's Agent)

(Date)

12. OFFICERS AND DIRECTORS			
12.1	D	KEMPER, JOSEPH	2633 LANTANA SUITE 18 LANTANA FL 33462
12.2	D	KEMPER, KATHRYN	2633 LANTANA SUITE 18 LANTANA FL 33462
12.3			
12.4			
12.5			
12.6			
12.7			
12.8			
12.9			
12.10			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
13.1			☐ Change ☐ Addition
13.2			☐ Change ☐ Addition
13.3			☐ Change ☐ Addition
13.4			☐ Change ☐ Addition
13.5			☐ Change ☐ Addition
13.6			☐ Change ☐ Addition
13.7			☐ Change ☐ Addition
13.8			☐ Change ☐ Addition
13.9			☐ Change ☐ Addition
13.10			☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 (2)(a), Florida Statutes. I further certify that the information contained 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in the filing of this filing is being made as an attorney with an address.

SIGNATURE:

Joseph C. Kemper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

445-95

407-964-3433

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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000011811 (4)

BRITTCO TRADING, INC.

APPROVED

02/09/1994

101 N. W. 10TH AVE
MIAMI, FLORIDA

Principal Office of Corporation: P. O. BOX 810951
BOCA RATON FL 33481-0951

Principal Office of Agent: P. O. BOX 810951
BOCA RATON FL 33481-0951

(DO NOT WRITE IN THIS SPACE)

3. Date of Incorporation or Qualification: 02/09/1994

3a. Date of Last Report

2. Principal Office of Corporation: 2a. Mailing Address:

21. State: 26. State: Apt. #:

22. City & State: 27. City & State:

23. City: 28. City: State: Zip: 29. Country:

24. 25. 29. 30.

4. FEI Number: 65-0467498

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

7. Has corporation ever been liquidated or dissolved by Chapter 607, Florida Statutes? Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALSER, THOMAS C ESQ.
7015 BERACASA WAY
SUITE 201
BOCA RATON FL 33433

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 607.0932 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 607.0932, Florida Statutes.

SIGNATURE

4-21-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME: BAILEY, GLENN
2. STREET ADDRESS: P.O. BOX 2452 N/A
3. CITY, ST. ZIP: BOCA RATON FL 33427

1. NAME: BURDETTE JR. BRUCE J.
2. STREET ADDRESS: P.O. BOX 810951 N/A
3. CITY, ST. ZIP: BOCA RATON, FL. 33481

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 607.0932(1)(b), Florida Statutes. I further certify that the information is not the subject of any pending or threatened legal action 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 a person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report or on an exhibit thereto with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/95

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
CORPORATION DIVISION

APPROVED
AND
FILED

02/13/95 PM 2:31

DOCUMENT # **P94000012342 (9)**

FLORIDA MUSCULAR HEALTH CENTER, INC.

1001 W. OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 2800 66TH STREET N
ST. PETERSBURG FL 33710
Mailing Address: 2800 66TH STREET N
ST. PETERSBURG FL 33710

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 02/11/1994		3a. Date of Last Report N/A	
4. FET Number # 59-322-1541		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	
7. This corporation has not had an incorporation tax credit for 1994. Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent BROWN, MARY 2800 66TH STREET N ST. PETERSBURG FL 33710		10. Name and Address of New Registered Agent 81 Name TONDA PERTILE 82 Street Address (P.O. Box Number is Not Acceptable) 2800 66th Street North 83 84 City St Petersburg FL 85 Zip Code 33710	
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11. Pursuant to the provisions of Sections 607.062 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 understand the obligations of Sections 607.062 and 607.1508, Florida Statutes.

SIGNATURE: *Tonda Pertile* 02/13/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)	
NAME D PERTILE, TONDA 2800 66TH STREET NORTH ST. PETERSBURG FL 33710		NAME P-VP-T-S-C-MD-Tr	☐ Change ☐ Addition
NAME D BROWN, MARY 2800 66TH STREET NORTH ST. PETERSBURG FL 33710		NAME D-VP-T-S BROWN, MARY 2800 66th Street North St Petersburg FL No longer with Corporation 33710	☒ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that it is true and correct for the corporation stated in Sections 11.01 and 11.02, Florida Statutes. I further certify that the information included in this filing is true and correct for the corporation stated in Sections 11.01 and 11.02, Florida Statutes. I further certify that I am an officer or director of the corporation or the person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *Tonda Pertile* Tonda Pertile 02/13/95 1813-345-9459