## 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

DOCUMENT # P94000032331 (8)

**BROWNELL & ASSOCIATES. INC.** 

Mailing Address Principal Place of Business 10543 WHEELHOUSE CIRCLE 10543 WHEELHOUSE CIRCLE **BOCA RATON FL 33428-1215 BOCA RATON FL 33428-1215** 3a. Date of Last Report 3. Date Incorporated or Qualified 04/25/1994 03/05/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0487330 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite. Apt. #. etc П 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** 28 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Country Zip Yes No Florida Statutes 25 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name REED, RANDALL H 1300 N FEDERAL HWY SUITE 102 Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33432** 83 84 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change □ DELETE 1.1 TITLE TITL F BROWNELL, DAVID 1.2 NAME NAME 10543 WHEELHOUSE CIRCLE 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETÉ Change 2.1 TITLE TITLE BROWNELL, REBECCA 2.2 NAME NAME 10543 WHEELHOUSE CIRCLE 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** 2. 4 City-ST-ZIP CITY - ST - ZIP Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE III) F 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETÉ 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

64 CiTY-ST-ZiP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIF

GNING OFFICER OR DIRECTOR

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 3 if changed, or on an attachment with an address.

**FILED** 

Feb 07 1997 8:00am

Secretary of State