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

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 9:39

DOCUMENT # **P94000045801 (5)**

1. Corporation Name
**1194 CORP.**

| Principal Place of Business | Mailing Address |
|---|---|
| 1037 COUNTRY CLUB DRIVE<br>N. PALM BEACH FL 33408 | 1037 COUNTRY CLUB DRIVE<br>N. PALM BEACH FL 33408 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/20/1994
3a. Date of Last Report:

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

4. FEI Number: 65-050 3432 — 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 § 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MURRAY, DICKRON E
1037 COUNTRY CLUB DRIVE
N. PALM BEACH FL 33408

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 _____
Signature, type or print name of registered agent, and title if applicable — Date — Registered Agent's name (if changed) and new address

| 12. OFFICERS AND/OR DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND/OR DIRECTORS | | |
|---|---|---|---|---|
| TITLE | D | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | MURRAY, DICKRON E | 62 NAME | | |
| STREET ADDRESS | 1037 COUNTRY CLUB DRIVE | 63 STREET ADDRESS | | |
| CITY ST ZIP | N. PALM BEACH FL 33408 | 64 CITY ST ZIP | | |
| TITLE | D | 71 TITLE | | ☐ Change ☐ Addition |
| NAME | MURRAY, MARJORIE L | 72 NAME | | |
| STREET ADDRESS | 1037 COUNTRY CLUB DRIVE | 73 STREET ADDRESS | | |
| CITY ST ZIP | N. PALM BEACH FL 33408 | 74 CITY ST ZIP | | |
| TITLE | D | 81 TITLE | | ☒ Change ☐ Addition |
| NAME | WILSON, C.R. | 82 NAME | | |
| STREET ADDRESS | 1037 COUNTRY CLUB DRIVE | 83 STREET ADDRESS | 8399 S. Shore Dr. | |
| CITY ST ZIP | N. PALM BEACH FL 33408 | 84 CITY ST ZIP | Palm Beach Gardens FL 33410 | |
| TITLE | D | 91 TITLE | | ☐ Change ☐ Addition |
| NAME | WILSON, EDWARD | 92 NAME | | |
| STREET ADDRESS | 1037 COUNTRY CLUB DRIVE | 93 STREET ADDRESS | 5700 Cordova Suite 303 | |
| CITY ST ZIP | N. PALM BEACH FL 33408 | 94 CITY ST ZIP | Ft. Lauderdale FL | |
| TITLE | D | 101 TITLE | | ☐ Change ☐ Addition |
| NAME | MURRAY, DAVID | 102 NAME | | |
| STREET ADDRESS | 1037 COUNTRY CLUB DRIVE | 103 STREET ADDRESS | | |
| CITY ST ZIP | N. PALM BEACH FL 33408 | 104 CITY ST ZIP | | |
| TITLE | | 111 TITLE | | ☐ Change ☐ Addition |
| NAME | | 112 NAME | | |
| STREET ADDRESS | | 113 STREET ADDRESS | | |
| CITY ST ZIP | | 114 CITY ST ZIP | | |

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and 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 the 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 the 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] — SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — 1/8/95 (Date) — 407-881-0700 (Area Code & Daytime Phone Number)

Q247302 CP