

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

FILED

Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000052149 (9)

1. Corporation Name
BRITTANY PROPERTY CARE, INC.



Principal Place of Business

5410 LOMA VISTA LOOP
DAVENPORT FL 33837
US

Mailing Address

5410 LOMA VISTA LOOP
DAVENPORT FL 33837-5004
US

3. Date Incorporated or Qualified
07/14/1994

3a. Date of Last Report
03/15/1996

2. Principal Place of Business

21 5418 Loma Vista Loop
Suite, Apt. #, etc.

22 City & State
Davenport, Florida

23 Zip
33837

25 Country
USA

24

2a. Mailing Address

26 5418 Loma Vista Loop
Suite, Apt. #, etc.

27 City & State
Davenport, Florida

28 Zip
33837

29

30 Country
USA

4. FEI Number
59-3256586

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

EMBERTON, KENNETH
5410 LOMA VISTA LOOP
DAVENPORT FL 33837

10. Name and Address of New Registered Agent

81 Name
Kenneth Emberton

82 Street Address (P.O. Box Number is Not Acceptable)

5418 Loma Vista Loop

83

84 City
Davenport

FL

85 Zip Code
33837

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/97

12. OFFICERS AND DIRECTORS

TITLE D
NAME JONES, THOMAS A LLAN
STREET ADDRESS 5845 LOMA VISTA COURT
CITY-ST-ZIP DAVENPORT FL ☒ DELETE

TITLE D
NAME EMBERTON, KENNETH
STREET ADDRESS 5410 LOMA VISTA LOOP
CITY-ST-ZIP DAVENPORT FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE D
2.2 NAME Emberton, Kenneth
2.3 STREET ADDRESS 5418 Loma Vista Loop
2.4 CITY-ST-ZIP Davenport, Florida ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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

Date

Daytime Phone #

2/16/97

CR2E034 (9/96)