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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DOCUMENT #

DIVISION OF CORPORATIONS P94000056540 (5)

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HAROLD	С.	RROWN	PROPERTIES.	INC
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Principal Place of Business Mailing Address 528 CLEMATIS ST. 528 CLEMATIS ST. WEST PALM BEACH FL 33402 WEST PALM BEACH FL 33402 3. Date Incorporated or Qualified 3a. Date of Last Report 07/29/1994 02/24/1995 2. Principal Flace of Business 2a. Mailing Address 4 FF! Number Applied For 65-0511316 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required Orty & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILONAS, TASO M 82 Street Address (P.O. Box Number is Not Acceptable) 1819 MAIN ST. **SUITE 1100** 83 SARASOTA FL 34236 84 City 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. Skyrishare systed or printed hands of registered agent and title if applicable (NOTE: Rogistered Agont eignature required when reinstalling) CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE DELETE 1 1 TITLE ☐ Change ☐ Addition BROWN, HAROLD C 1.2 NAME 528 CLEMATIS ST. STREET ADDRESS 13 STREET ADDRESS WEST PALM BEACH FL 33402 City - St - ZiP 1.4 CITY - ST - ZIP D DELETE THLE Change 2 1 TITLE ☐ Addition SEWELL, WORLEY L JR. NAME 22 NAME **528 CLEMATIS ST** STREET ADDRESS 2.3 STREET ADDRESS WPB FL CITY - ST-ZIP 24 CITY-ST-ZIP THEF DELETE 3 1 TITLE ☐ Change ☐ Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - ZIP 34 CITY-ST-ZIP THILE DELETE 4 1 TITLE Change ☐ Addition NAMI 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST ZIP 4.4 CiTY - ST - ZIP DILE ☐ DELETE ☐ Change 5 1 TITLE ☐ Addition NaMi 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - \$1 - 7IP 5.4 CITY - ST - ZIP TELF DELETE 6 1 TITLE Change ☐ Addition NAME 5 2 NAME STREET ADDRESS 63 STREET ADDRESS

14. I do herety certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on triis 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 office 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

6.4 CHTY-\$1-ZIP

HAROLD C.BROWN 3-12-96 (407) 832-717/