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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

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PHOENIX NEWCASTLE, INC. Principal Place of Business Mailing Address 3837 NORTHDALE BLVD. 3837 NORTHDALE BLVD. SUITE 296 **SUITE 296** TAMPA FL 33624 TAMPA FL 33624 3. Date Incorporated or Qualified 3a. Date of Last Report 08/29/1994 08/15/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3263293 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Z_{10} Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLER JR, JOSEPH J Street Address (P.O. Box Number is Not Acceptable) 82 18210 BITTERN AVE **LUTZ FL 33549** 83 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agreet squature requir Signature, typed or printed name of registered agent and title it accorable remiliating) CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 Tates Change Addition MILLER, JOSEPH J JR NAME 1.2 NAME 18210 BITTERN AVE. STREET ADDRESS 1.3 STREET ADDRESS **LUTZ FL 33549** CHTY-ST-ZIP 1.4 CITY - ST - ZIP [] DELETE 10:45 2 1 11111 ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CHY-ST-ZIP 2 4 CITY - ST-ZIP TITLE DELETE

64 CITY+ST-ZIP 14. I do 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)(k), 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 logal 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.

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