

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

APPROVED
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96 MAY -1 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000064516 (5)

1. Corporation Name

BROGDON, TIETJEN TECHNOLOGIES, INC.

Principal Place of Business

41 W. SECOND STREET
ATLANTIC BEACH FL 32233

Mailing Address

41 W. SECOND STREET
ATLANTIC BEACH FL 32233

3. Date Incorporated or Qualified

09/01/1994

3a. Date of Last Report

04/13/1995

4. FET Number

59-3262755

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

2. Principal Place of Business

21 41 W. SECOND STREET

Suite, Apt. #, etc.

22 City & State

23 ATLANTIC BEACH, FLORIDA

24 Zip

32283

Country

25 U.S.A.

2a. Mailing Address

26 1108 OCEANWOOD DR. STH

Suite, Apt. #, etc.

27 City & State

28 NEPTUNE BEACH, FLORIDA

29 Zip

32266

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

CORRADINO, ANN B.
599 ATLANTIC BLVD.
SUITE 4XX
ATLANTIC BEACH FL 32233

10. Name and Address of New Registered Agent

81 Name

PAUL M. EAKIN

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

599 ATLANTIC BLVD.
SUITE 4

83 City

ATLANTIC BEACH

FL

85 Zip Code

32233

11. Pursuant to the provisions of Sections 607.0502 and 607.1308, 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 607.0502, Florida Statutes.

SIGNATURE

ANN B. CORRADINO

Signature (Typed or Printed Name of Registered Agent and is applicable)

NOTE: Registered Agent signature required

PAUL M. EAKIN

DATE

4/26/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	TIETJEN, IAN	1275 BEGONIA STREET	ATLANTIC BEACH FL 32233	<input type="checkbox"/>
VD	BROGDON, WILLIAM III	1108 OCEANWOOD DR. SOUTH	NEPTUNE FL	<input type="checkbox"/>
ST	BROGDON, AMY L	1108 OCEANWOOD DR. SOUTH	NEPTUNE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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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 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: IAN S. TIETJEN PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 2704-0070

Date (Daytime Phone)

CR2E034 (12/95)