

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000088976 (3)

1. Corporation Name

BRICKLEY, INC.



Principal Place of Business

Mailing Address

36 CHRISTIAN DRIVE
CHEEKTOWAGA NY 14225-4448

36 CHRISTIAN DRIVE
CHEEKTOWAGA NY 14225-4448

3. Date Incorporated or Qualified

12/02/1994

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 213 Towne Center Cir

26 213 Towne Center Cir.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Sanford, FL

28 Sanford FL

Zip

Country

Zip

Country

24 32771

25 USA

29 32771

30 USA

4. FEI Number

59-3295224

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

10. Name and Address of New Registered Agent

OSSINSKY, MARC P
210 N. WYMORE RD.
WINTER PARK FL 32789

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME BRIECHLE, PETER
STREET ADDRESS 36 CHRISTIAN DRIVE
CITY-ST-ZIP CHEEKTOWAGA NY 14225-4448

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME BRIECHLE, PETER
1.3 STREET ADDRESS 557 Whittingham Place
1.4 CITY-ST-ZIP Lake Mary, FL 32746

TITLE ☐ DELETE

NAME BRIECHLE, ANDRE
STREET ADDRESS 55 MT. VERNON AVE.
CITY-ST-ZIP BUFFALO NY 14210

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME BRIECHLE, ANDRE
2.3 STREET ADDRESS 557 Whittingham Place
2.4 CITY-ST-ZIP Lake Mary, FL 32746

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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 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:

Peter Briechle

PETER BRIECHLE

4/15/96

(407) 330-0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone #

CR2E034 (12/95)