

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 11 1995

DOCUMENT # P94000090691 (4)

1. Corporation Name

HANDLEY PROPERTIES, INC.

Principal Place of Business

**9159 SW 77TH AVENUE STE. 305
MIAMI FL 33156**

Mailing Address

**9159 SW 77TH AVENUE STE. 305
MIAMI FL 33156**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-1655614

Applied For

Not Applicable

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

22

27

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

23

28

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ASCHENBRENNER, RICHARD W ESQ.
9330 SO. DADELAND BLVD. STE. 1209
MIAMI FL 33156**

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 in printed name of registered agent and the filer)

(NOTE: Registered Agent signature required when nominating)

(JAT)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**PD
HANDLEY, M L
9159 SW 77TH AVENUE STE. 305
MIAMI FL 33156**

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

15 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**SD
HANDLEY, PATRICIA L
9159 SW 77TH AVENUE STE. 305
MIAMI FL 33156**

21 NAME

22 STREET ADDRESS

23 CITY ST ZIP

24 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 NAME

32 STREET ADDRESS

33 CITY ST ZIP

34 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 NAME

42 STREET ADDRESS

43 CITY ST ZIP

44 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 NAME

52 STREET ADDRESS

53 CITY ST ZIP

54 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 NAME

62 STREET ADDRESS

63 CITY ST ZIP

64 TITLE ☐ Change ☐ Addition

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)(b), 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 preparer or filer 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:

Patricia L. Handley V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, DIRECTOR

5/1/95

305-274-3353

DATE AND PHONE #