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CORPORATION ANNUAL REPORT

appears in Block 12 or Block 13 if changed, or on an attack

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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

1996

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**DOCUMENT #** HOWARD FAMILY CORPORATION, INC. Principal Place of Business Mailing Address 12 TIDY ISLAND BLVD 12 TIDY ISLAND BLVD **BRADENTON FL 34210 BRADENTON FL 34210** 3. Date Incorporated or Qualified 3a. Date of Last Report 07/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0599584 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζiρ 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 8 Name HOWARD, FRANCIS M 82 Street Address (F.O. Box Number is Not Acceptable) 12 TIDY ISLAND BLVD **BRADENTON FL 34210** 83 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIFFECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 28 TITLE DELETE 1. 1 TifuE Change Addition HOWARD, FRANCIS M NAME 1.2 NAME CR2E034 12 TIDY ISLAND BLVD STREET ADDRESS 1.3 STREE! ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP 1.4 CHY - ST. ZIP TITLE □ DELETE 2 1 1 0 6 ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7/P 2 4 Ci<u>ty - 51 - 2iP</u> THLE DELETE 3 179.6 nc:tibbA NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 OFY - 31 - 70F TITLE DELF TE 4 1 DOLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREE ADDRESS CITY-ST-ZIP 4.4 CITY - IT - ZIF TITLE [] DELETE 5 11/11/1 Change Add tion 5.2 NAME STREET ADDRESS 5.3 STREE ADDRESS OTY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 NO F ☐ Change Addit on NAME STREET ADDRESS. 63 STREE ADDRESS CITY-ST-ZIP 6.4 CITY - 5.1 - Z.P 14. Ido hereby certify that the information supplied with this filing is voluntarily turnished 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 eath; 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