FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000068863 (6)

CONCORD SQUARE, INC.

appears in Block 12 or Block

Principal Place of Business Mailing Address					r sadrings tin taies mills delit antit bette	· Bākirā Airāi 18101 tālitē Atiā	AD 41910 LAMBI
33 EAST ROBI ORLANDO FL	INSON STREET STE 203 32801		33 EAST ROBINSON STREET STE 203 ORLANDO FL 32801-1664				
					3. Date Incorporated or Qualified 09/05/1995	3a. Date of Last R 01/30/1996	leport
2. Principal f	Place of Business	2a. Mailing Address			4. FEI Number		oplied For
21		26			59-2780739	No	ot Applicable
Suite, Apt. #, etc 22		Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired		
City & Sta	te	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zıp	Country	Zip	Cou	ntry	8. This corporation has liability for i	ntangible tax under s	. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agent	
	RPHY, FRANK W			81 Name			
33 EAST ROBINSON STREET STE 203 ORLANDO FL 32801				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City		FL 85 Zip	Code
11. Pursuant office or	to the provisions of Sections 607 registered agent, or both, in the S	0502 and 607.1508, Florida state of Florida Such change	Statutes, the at was authorized	ove-named cor t by the corpora	poration submits this statement for the pation's board of directors. I hereby accept		ls registered registered
	am familiar with, and accept the o	bligations of, Section 607.050	05. Florida Stati	utes.			·
SIGNATURE	Signature typed or préved hai le diregistere	d second and tills it secondaries	(NOTE: Registerer	Agent eigneture reg	ired when reinstating)	DATE	
12.	***************************************	AND DIRECTORS	13.	Ageni signature redu	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	D	☐ DELET		LE		Change	Addition
NAMÉ	MURPHY, FRANK W		1.2 NA	ME		•	_
STREET ADDRESS 33 EAST ROBINSON STREET ST		ET STE 203	E 203 1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32801		1.4 CP	Y+ST-ZIP			
TITLE	D	☐ DELET				Change	Addition
NAME	MURPHY, MARCIA A		2.2 NA	ME			
STREET ADDRESS	33 EAST ROBINSON STREE	et ste 203	2 3 ST	REET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32801		2. 4 Ci	TY-ST-ZIP			
TITLE	}	DELET	3.1 TIT	LE		Change	☐ Addition
NAME	1		3.2 NA	ME			
STREET ADORESS			3.3 ST	reet address			
CITY - ST - 71P				TY-ST-ZIP			
TITLE		☐ DELET	£ 4.1 TIT	LE		☐ Change	Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP		····		Y-ST-ZIP			
TOLE		☐ DELET	£ 5.1 TIT	LE		☐ Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			
CHTY-ST-7/P				Y · ST · ZIP			
TITLE		DELET	E 6.1 TIT	LE		☐ Change	Addition
NAME			6.2 NA	ME			
STREET ADDRESS			63.51	REET ADDRESS			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE: THE DISTANCE OF MEMORY I