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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000072769 (9)

1. Corporation Name
BIRCHWOOD ASSOCIATES, INC.



Principal Place of Business
1436 SEAGRAPE CIRCLE
FT LAUDERDALE FL 33326

Mailing Address
1436 SEAGRAPE CIRCLE
FT LAUDERDALE FL 33326-2724

3. Date Incorporated or Qualified 09/18/1995
3a. Date of Last Report 04/28/1996

2. Principal Place of Business

21 55 Weston Road

Suite, Apt. #, etc.

22 Suite 309

City & State

23 FT Lauderdale FL

Zip

24 33326

Country

25 Broward

2a. Mailing Address

26 55 Weston Road

Suite, Apt. #, etc.

27 Suite 309

City & State

28 FT Lauderdale FL

Zip

29 33326

Country

30 Broward

4. FEI Number

65-0619404

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

PLEETER, LOUIS J ESO
2255 GLADES RD, SUITE 236-W
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

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

TITLE P
NAME COLANGELO, VINCENT
STREET ADDRESS 1436 SEAGRAPE CIRCLE
CITY - ST - ZIP FT. LAUDERDALE FL 33326

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME COLANGELO, VINCENT
1.3 STREET ADDRESS 55 WESTON ROAD - SUITE 309
1.4 CITY - ST - ZIP FT LAUDERDALE, FL 33326

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vincent Colangelo 1/28/97

Date

954 389 8300

Daytime Phone #

CR2E034 (9/96)