


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

FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000075183 (0)

1. Corporation Name

NBD BANK

Principal Place of Business

1320 VENICE AVENUE
VENICE FL

Mailing Address

1320 VENICE AVENUE
VENICE FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1995

4. FEI Number

38-2935658

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1320 Venice Ave. E.

26 1320 Venice Ave. E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 34292

25

29 34292

30

9. Name and Address of Current Registered Agent

ROBINSON, ALEXANDER C JR
1320 VENICE AVENUE
VENICE FL 34292

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1320 Venice Ave. E.

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 DV
NAME MCCULLEN, RICHARD J
STREET ADDRESS 611 WOODWARD AVENUE
CITY-ST-ZIP DETROIT MI ☐ DELETE

TITLE D
NAME VALPEY, WILLARD A
STREET ADDRESS 611 WOODWARD AVENUE
CITY-ST-ZIP DETROIT MI ☒ DELETE

TITLE PD
NAME ROBINSON, ALEXANDER C JR
STREET ADDRESS 1320 VENICE AVE
CITY-ST-ZIP VENICE FL ☐ DELETE

TITLE D
NAME KAISER, JERRY L
STREET ADDRESS 1320 VENICE AVENUE
CITY-ST-ZIP VENICE FL ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 48226

2.1 TITLE D
2.2 NAME PAINE, ANDREW J JR
2.3 STREET ADDRESS ONE INDIANA SQUARE
2.4 CITY-ST-ZIP INDIANAPOLIS IN 46266 ☐ Change ☒ Addition

3.1 TITLE PDC
3.2 NAME
3.3 STREET ADDRESS 1320 VENICE AVE. E.
3.4 CITY-ST-ZIP 34292 ☒ Change ☐ Addition

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 1320 VENICE AVE. E.
4.4 CITY-ST-ZIP 34292

5.1 TITLE D
5.2 NAME GRAVELLE, FREDERICK H
5.3 STREET ADDRESS 11300 US HIGHWAY ONE SUITE 101
5.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408 ☐ Change ☒ Addition

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

14. I 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:  RECORDED Kaiser

941/486-3401

CR2E034 (10/97)