

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

FILED

Feb 24 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 # P95000075327 (3)

1. Corporation Name  
THE BUSINESS BROKERS, INC.

Principal Place of Business

2206 MIRACLE PLAZA  
VERO BEACH FL 32960

Mailing Address

2206 MIRACLE PLAZA  
VERO BEACH FL 32960-6029



2. Principal Place of Business

21 1701 Highway A1a

Suite, Apt. #, etc.

22 Suite 218

City & State

23 Vero Beach, FL

Zip

24 32963

Country

25 USA

2a. Mailing Address

26 1701 Highway A1a

Suite, Apt. #, etc.

27 Suite 218

City & State

28 Vero Beach, FL

Zip

29 32963

Country

30 USA

3. Date Incorporated or Qualified

09/25/1995

3a. Date of Last Report

03/04/1996

4. FEI Number

65-0616515

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

7. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CONDIT, ROBERT D. S  
3375 BUCKINGHAMMOCK TRAIL  
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name

Goodwin, Walter T.

82 Street Address (P.O. Box Number is Not Acceptable)

6656 110th Street

83

84 City

Sebastian

FL

85 Zip Code

32958

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

*Walter T. Goodwin*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-18-97

12. OFFICERS AND DIRECTORS

TITLE D  
NAME CONdit, ROBERT D. S  
STREET ADDRESS 3375 BUCKINGHAMMOCK TRAIL  
CITY-ST-ZIP VERO BEACH FL 32960

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Director  
1.2 NAME Walter T. Goodwin  
1.3 STREET ADDRESS 6656 110th Street  
1.4 CITY-ST-ZIP Sebastian, FL 32958

☐ 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: *Walter T. Goodwin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-97

Date

861 284-2400

Daytime Phone #

CR2E034 (9/96)