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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # P95000086947 (5)

DAVID A. CARLSON INC.

| 515 BRACKENWOOD PLACE PALM BEACH GARDENS FL 33418-9056 | | | 515 BRACKENWOOD PLACE PALM BEACH GARDENS FL 33418-9056 | | | | | | | | | | |
|---|--|----------------------------------|---|------------------|-------|---|--|---|------------|---------------------|-------------------|--|--|
| | | | | | | | | Date incorporated or Qualified 11/13/1995 | | of Last F 1/1996 | Report | | |
| | | | ing Address | | | | 4 | I, FEI Number | | | pplied For | | |
| Suite, Apt | # etc | 26 Suite | Apt. #, etc. | | | | | NOT APPLICABLE | | | ot Applicable | | |
| 22 27 | | | | | | | 5 | 5. Certificate of Status Desired See Required Fee Required | | | | | |
| City & State |) | ····· | State | | | | 6 | Election Campaign Financing Trust Fund Contribution | | | May Be to Fees | | |
| Zip 24 | Country 25 | Z ip 29 | | 30 Cou | ntry | | | |] Yes 🔲 | No | s. 199.032, | | |
| | g. Name and Address of | Current Registered / | Agent | | | | |), Name and Address of New Re | gistered A | gent | | | |
| CARLSON, DAVID | | | | | 81 | Name | • | | | | | | |
| 515 BRACKENWOOD PLACE PALM BEACH GARDENS FL 33418-9056 | | | | | 82 | Street | Address (| dress (P.O. Box Number is Not Acceptable) | | | | | |
| | | | | | 83 | | | | | | | | |
| | | | | | 84 | City | | | <u>—</u> 1 | 85 Zip | Code | | |
| 11 Pursuant t | o the provisions of Sections 6 | 07 0502 and 607 150 | R Florida State | ites the a | 2014 | -named | 1 corporati | on submits this statement for the n | FL | hanging | te registered | | |
| office or re | egistered agent, or both, in the in familiar with, and accept the | e State of Florida. Suc | th change was | authorize | d by | the corp | poration's | on submits this statement for the p board of directors. I hereby accep | the appoi | ntment as | registered | | |
| - | mamiliar with, and accept the | e obligations of, Section | .11 007.0303, 1 | iorida Şiai | utes | • | | | | | | | |
| SIGNATURE | Signature, typed or printed name of regis | lered agent and title if applica | ble. (NK | TE: Registere | Age | nt signature | e required whe | en reinstating) | DATE | | | | |
| 12. | OFFICE | RS AND DIRECTORS | | 13. | | | | ADDITIONS/CHANGES TO OFFIC | ERS AND I | DIRECTO | RS IN 12 | | |
| TITLE | D | | DELETE | 1,1 70 | TLE | | | | | Change | Addition | | |
| NAME | MURRAY, WILLIAM | | | 1,2 N/ | ME | | Í | | | | | | |
| STREET ADDRESS | 621 ROSA COURT | | | 1.3 \$1 | REET | ADDRESS | | | | | | | |
| CfTY-ST-ZIP | PALM BEACH GARDENS | FL 33410 | | 1.4 Cł | TY-51 | T-ZIP | | | | | | | |
| TITLE | D | | DELETE | 2.1 Tr | | • | ************************************* | | | Change | Addition | | |
| NAME | BOYD, RAY | | | 2.2 N/ | ME | | | | | | : | | |
| STREET ADDRESS | 2 HARVARD COURT | | | 2351 | REFT | ADORESS | | | | | | | |
| CITY-ST-ZIP | WEST PALM BEACH FL | 33409 | | 2. 4 C | | | | | | | | | |
| TITLE | D | | DELETE | 3.1 Ti | | II-ZIF | | | T | Change | Addition | | |
| NAME | CUBINO, RAY | | | 3.2 N/ | | | | | - | onango | 7.007.07. | | |
| STREET ADDRESS | 555 OLD POST ROAD | | | | | ADDRESS | | | | | | | |
| 1 | EDISON FL 08816 | | | | | | | | | | | | |
| CITY-ST-ZIP TITLE | P | | DELETE | 3.4. C 4.1 Ti | | 1 - ZIP | | | т | Change | Addition | | |
| 1 | CARLSON, DAVID | | L DELETE | | | | | | L | T change | LJ Addition | | |
| NAME | | | | 4. 2 N | | | | | | | | | |
| STREET ADDRESS | 515 BRACKENWOOD PL | | | | | ADDRESS | | | | | | | |
| CITY - ST - ZIP | PALM BEACH GARDENS | 5 FL 33418-9056 | F-1 55.575 | | TY-ST | I - ZIP | | | | | | | |
| TITLE | | | DELETE | 5.1 Ti | | | | | Ł | Change | Addition | | |
| NAME | | | | 5.2 N/ | ME | | | | | | | | |
| STREET ADDRESS | | | | 5.3 ST | REET. | ADORESS | | | | | | | |
| CITY - S1 - ZIP | | | | 5.4 CI | IY-SI | I - ZIP | | | | | | | |
| TITLE | | | DELETE | 6.1 11 | TLE | | | | Ţ | Change | Addition | | |
| NAME | | | | 6.2 N/ | ME | | | | | | | | |
| STREET ADDRESS | | | | 6.3 ST | REET. | ADORESS | | | | | , | | |
| 1 | | | | | | | 1 | | | | 1 | | |

FILED Feb 11 1997 8:00am Secretary of State

| | T 1884 JAHR 1818 JAHRA MARIA MARIA MARIA | 90(9) (B)(0 B) | 111 0 #1 | ILIA BIDAN NGUN NGOS | | | | |
|---|--|-------------------------|-----------------------------------|----------------------|--|--|--|--|
| | | | | | | | | |
| 3. | Date Incorporated or Qualified | 3a. Date of Last Report | | | | | | |
| | 11/13/1995 | 05/01/1996 | | | | | | |
| 4. | FEI Number | | \Box | Applied For | | | | |
| | NOT APPLICABLE | | | 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 | | | | | | | | |
| 10. | Name and Address of New Reg | istered A | gent | | | | | |
| | | | | | | | | |
| (F | O. Box Number is Not Acceptable | e) | | | | | | |
| | | | | | | | | |
| | | FL | 85 | Zip Code | | | | |
| tion submits this statement for the purpose of changing its registered is board of directors. I hereby accept the appointment as registered | | | | | | | | |
| | reinstating) | DATE | | | | | | |
| ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 | | | | | | | | |

6.4 CITY - ST - ZIP CITY-ST-ZIP 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: