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

PROFIT CORPORATION **ANNUAL REPORT**

24



9. Name and Address of Current Registered Agent

THE HERRICK COMPANY, INC. 2295 CORPORATE BOULEVARD NW

BOCA RATON FL 33431

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P96000026863 (6)

ORH, INC.	300020000 (0)			
Principal Place of Business 2295 CORPORATE BOULEVARD NW STE 222 BOCA RATON FL 33431	Mailing Address 2295 CORPORATE BOULEVARD NW STE 222 BOCA RATON FL 33431	DO NOT WRITE IN THIS SPACE		
	•••	3. Date Incorporated or Qualified 03/21/1996		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied F		
21	26	65-0654630 Not Appli		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired \$8.75 Addition Fee Required		
City & State	City & State	6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees		
Zip Country	Zip Country	8. This corporation owes or has paid the current year Intangible		

FILED Mar 27 1998 8:00am Secretary of State



Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Yes

561-241-9880

				<u> </u>			
			84	Cit	ity 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 pented name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) DATE OATE							
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE 4	DPST	DELETE	1.1 TITLE		Change Ado	dition	
NAME	HERRICK, NORTON		1.2 NAME				
STREET ADORESS	2295 CORPORATE BOULEVARD NW	Ī	1.3 STREET	ADDRE	ress	ì	
CITY-ST-ZIP	BOCA RATON FL	I	1.4 CITY - S	i	p		
TITLE	VAS	DELETE	2.1 TITLE		Change Add	dition	
NAME	HERRICK, HOWARD	i	2.2 NAME				
STREET ADDRESS	20 COMMUNITY PLACE, 3RD FLOOR		2.3 STREET	ADDRE	ress	Į	
CITY-ST-ZIP	MORRISTOWN NJ		2. 4 CITY-5	ST-ZIP	P		
TITLE	VAS	DELETE	3.1 TITLE		☐ Change ☐ Ado	dition	
NAME	HERRICK, MICHAEL	1	3.2 NAME			1	
STREET ADDRESS	2295 CORPORATE BLVD NW, #222		3.3 STREET	ADDRE	RESS :		
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY-S	ST-ZIP	Р	- [
TITLE		DELETE	4.1 TITLE	•	Change Add	lition	
NAME			4. 2 NAME				
STREET ADDRESS		1	4.3 STREET	ADDRE	RESS)	
CITY-ST-ZIP			4.4 CITY-S	7-ZIP			
TITLE		DELETE	5.1 TITLE		Change Add	fition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRE	RESS	l	
City-ST-ZIP			5.4 CITY-S	Y- ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Add	fition	
NAME		1	6.2 NAME			j	
STREET ADDRESS		1	6.3 STREET	ADDRE	RESS	ļ	
CITY - ST - ZIP			6.4 CITY - S				
14. Thereby 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 in the receiver of the same legal effect as if made under oath; that I am an officer or director of the colputation in this 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 chapter 607 attachment with an address.							

81 Name

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