

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90135 029 ***150.00

DOCUMENT # P96000060070

1. Corporation Name
APOPKA RETAIL PARTNERS, INC.



Principal Place of Business

~~5761 BIRD ROAD~~
~~MIAMI FL 33155~~

Mailing Address

~~5761 BIRD ROAD~~
~~MIAMI FL 33155~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/16/1996

4. FEI Number

65-0689818

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 **200 Pasadena Place**
Suite, Apt. #, etc.

2a. Mailing Address

26 **200 Pasadena Place**
Suite, Apt. #, etc.

City & State

23 **Orlando, FL**

Zip Country

24 **32803** 25 **USA**

City & State

28 **Orlando, FL**

Zip Country

29 **32803** 30 **USA**

9. Name and Address of Current Registered Agent

BRANDON, STEPHEN E

~~5761 BIRD ROAD~~
~~MIAMI FL 33155~~

10. Name and Address of New Registered Agent

81 Name

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

200 Pasadena Place

83

84 City **Orlando**

85 **FL**

Zip Code
32803

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 ☐ DELETE

NAME
PD BRANDON, W E
STREET ADDRESS
~~5761 BIRD ROAD~~
CITY-ST-ZIP
~~MIAMI FL 33155~~

TITLE ☐ DELETE

NAME
VD BRANDON, JEFFREY
STREET ADDRESS
5761 BIRD ROAD
CITY-ST-ZIP
MIAMI FL 33155

TITLE ☐ DELETE

NAME
STD BRANDON, STEPHEN E
STREET ADDRESS
~~5761 BIRD ROAD~~
CITY-ST-ZIP
~~MIAMI FL 33155~~

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

200 Pasadena Place
Orlando FL 32803

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

200 Pasadena Place
Orlando FL 32803

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

0226337