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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000070100 (8)

MEDLEY BROTHERS, INC.

Principal Place of Business Mailing Address % DONALD J. KISSLAN % DONALD J. KISSLAN 4431 SW 64 AVE., #119 4431 SW 64 AVE. #119 DAVIE FL 33314 DAVIE FL 33314-3458 3. Date Incorporated or Qualified 3a. Date of Last Report N/A 08/22/1996 2a. Mailing Address 4. FEI Number 2. Principa' Place of Business Applied For 65-0707421 Not Applicable 21 Suite, Apt. #, etc. Suite Apt. # etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zφ Country Zici 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 🗌 Yes 🛣 No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KISSLAN, DONALD J 4431 SW 64 AVENUE #119 Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33314** 83 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 Signitive type of or printed traine of registors a agent and the if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE Change Addition 1.1 TITLE TITLE MEDLEY, DENNIS R 1.2 NAME NAME 396 KEYSTONE DRIVE 1.3 STREET ADDRESS STREET ADDRESS VALPARAISO IN 46383 1.4 CITY-ST-ZIP CITY - ST - 2IP DELETE ☐ Change Addition TITLE 2.1 TITLE MEDLEY, CHARLES D NAME 2.2 NAME 2310 DOMBEY ROAD STREET ADDRESS 2.3 STREET ADDRESS PORTAGE IN 46368 City-St-29 2.4 CITY-ST-ZiP DELETE Change Addition 3.1 TITLE MEDLEY, MYLES L 3.2 NAME NAME 161 E. CO ROAD #250S STREET ADDRESS 3.3 STREET ADDRESS VALPARAISO IN 48383 CITY ST ZIP 3.4 CITY-ST-7/P ☐ DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change \_\_\_ Addition TIME 5.2 NAME NAME 5.3 STREET ADDRESS STREET ACCRESS 5.4 CITY - \$T - ZIP CITY-ST-7IF DELETE Change \_\_\_ Addition TITLE **6.1 TITLE** NAME 6.2 NAME STHEFT ADORESS 6.3 STREET ADDRESS

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 ock 13 if changed, or on an attachment with an address. appears in Block 12 or

6.4 CITY - ST - ZIP

SIGNATURE

CHY-ST-ZIP

18/97 219-759-3449

**FILED** 

Feb 25 1997 8:00am

Secretary of State