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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 22 1997 8:00am

Secretary of State

Sandra B. Wortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000070139 (6)

VAN VECHTEN, BURKE & ASSOCIATES, INC.

Principal Place of Business Mailing Address P.O. BOX 99 2575 S. OCEAN BLUD BOCA RATON, FL SUITE 106 S HIGHLAND BEACH, FL 3. Date Incorporated or Qualified 3a. Date of Last Report 33429 08/22/1996 33487 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Ζip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BURKE, JOHN K 82 Street Address (P.O. Box Number is Not Acceptable) 2575 SOUTH OCEAN BLUD. SUITE 106 S 83 33487 HIGHLAND BEACH, FLA 84 City 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. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 JAY H. VAN VECHTEN 2515 S. OCEAN BLID DELETE Change Addition 1.1 TITLE TITLE NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS HIGHLAND BEACH, FL *33487* 1.4 CITY - ST - ZIP CITY-ST-71F DELETE Change Addition TITLE PRESIDENT 2.1 TITLE JOHN K. BURKE NAME 2.2 NAME 2575 S. OCEAN BLUD STREET ADDRESS 2.3 STREET ADDRESS 33487 DELETE HIGHLAND BEACH, PL. CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 34. City-St-ZiP DELETE ☐ Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 T(7LE TITLE NAME 5.2 NAME **5.3 STREET ADORESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 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