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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000074868 (6)

**BRINTON INC.** 

STREET ADDRESS

CITY-ST-ZIP

**FILED** Apr 03 1998 8:00am Secretary of State

A COMPANIAN AND ARMA SINCE STAND AND ARMA COME COMES AND COMES AND ARMAD AND COMES AND

Principal Place of Business	Mailing Addr	ess		C CONTROL IN TRUE AND THE PARTY BANK BANK BANK	INDS AFRAN CATER MINTO INS FRAN
PRI BLAIRSTONE RD.	APT. 66			DO NOT WRITE IN THIS SPACE	
TALLAHASSGE PL 32301	INLLANASS	22301		3. Date Incorporated or Qualified 09/10/1996	00.7102
2. Principal Place of Business	2a. Mailing A	ddress		4. FEI Number	Applied For
1 1555 Delaneu	DC 26			59-3400321	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt	. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & Sta	te		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 25	Zip <b>29</b>	30 Cou	ntry	This corporation owes or has paid the operation Property Tax due June 30.	current year Intangible
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
BRINTON, DARRYL S	9.0	(a, a, b, a)	81 Name		
APT. 68 TRILY, FI. 32308			82 Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 02301	HIId' M. D	ع <i>حو</i> ر	83	***************************************	
			84 City	F	L 85 Zip Code
11. Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent. I am familiar with, and accept the	e State of Florida. Such c	hange was authorized	d by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered ppointment as registered

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12, 13. \_\_\_ Addition \_\_ DELE**TE** Change 1,1 TITLE TITLE DO+.700 **BRINTON, DARRYL S** NAME etal Blairatone ao 1555 Del Aneu Di STREET ADDRESS 1.3 STREET ADDRESS TOIllahaccee, Cl 92 3408ct-zip CITY-ST-ZIP Addition Change TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ☐ Addition 3.1 TITLE MILE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition Addition 6.1 TITLE TITLE NAME 6.2 NAME

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.

6.4 CITY - ST - ZIP

6.3 STREET ADDRESS