

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

FILED

Feb 14 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000086908 (6)

1. Corporation Name

QUINNIACK REAL ESTATE & DEVELOPMENT CORPORATIO  
N

Principal Place of Business

2800 N OCEAN DR B-21B  
SINGER ISLAND FL 33404

Mailing Address

2800 N OCEAN DR B-21B  
SINGER ISLAND FL 33404-32383. Date Incorporated or Qualified  
10/15/19963a. Date of Last Report  
FIRST REPORT

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City &amp; State

23

Zip

Country

24

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

Zip

Country

4. FEI Number

X Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAMBY, LOUIS L III  
321 ROYAL POINCIANA PLAZA  
PALM BEACH FL 33480

81 Name

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

83

84 City

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIPPRES / TREAS / DIRECTOR  
JOSEPH J. FARRICIELLI  
2800 N OCEAN DR B-21 B  
SINGER ISLAND, FL 33404-3238

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIPV.PRES / SEC / DIRECTOR  
JEAN L. FARRICIELLI  
2800 N. OCEAN DR B-21 B  
SINGER ISLAND, FL 33404-3238

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIPDIRECTOR  
VINCENT R. FARRICIELLI  
53 MONTOYA DR.  
BRANFORD, CT 06405

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIPDIRECTOR  
JOSEPH J. FARRICIELLI, JR.  
104 CHERRY HILL RD.  
BRANFORD, CT 06405

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

Change Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH J. FARRICIELLI JAN. 16, 1997 (601) 881-7656

Date

Daytime Phone #

CR2E034 (9/96)