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FILED

May 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000088829 (2)

1. Corporation Name

THE EASTON-BABCOCK COMPANIES, INC.

Principal Place of Business  
300 GRECO AVENUE  
CORAL GABLES FL 33146

Mailing Address  
300 GRECO AVENUE  
CORAL GABLES FL 33146-1811

3. Date Incorporated or Qualified  
10/28/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

65-0727102

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 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

BABCOCK, CALVIN H  
300 GRECO AVENUE  
CORAL GABLES FL 33146

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 PSD  
NAME EASTON, EDWARD W  
STREET ADDRESS 300 GRECO AVENUE  
CITY-ST-ZIP CORAL GABLES FL 33146

1.1 TITLE Chairman  
1.2 NAME Edward W. Easton  
1.3 STREET ADDRESS 300 Greco Avenue  
1.4 CITY-ST-ZIP Coral Gables, FL 33146  
☒ Change ☐ Addition

TITLE VTO  
NAME BABCOCK, CALVIN H  
STREET ADDRESS 300 GRECO AVENUE  
CITY-ST-ZIP CORAL GABLES FL 33146

2.1 TITLE President, Secretary  
2.2 NAME Calvin H. Babcock  
2.3 STREET ADDRESS 300 Greco Avenue  
2.4 CITY-ST-ZIP Coral Gables, FL 33146  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE Sr. V.P., Treasurer  
3.2 NAME J. Ed Bell  
3.3 STREET ADDRESS 300 Greco Avenue  
3.4 CITY-ST-ZIP Coral Gables, FL 33146  
☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 REQUIRED

EDWARD W. EASTON - Chairman

4/28/97 (305) 448 9999

Date

Daytime Phone #

0206279

CR2E034 (9/96)