| _            |
|--------------|
| ~            |
| Ó            |
| Q            |
| $\mathbf{r}$ |
| ~            |
| 7            |
| დ)           |
| 9            |
| щ            |
| Ñ            |
| Œ            |
| $\circ$      |
| _            |
|              |

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

| . COR                         | PROFIT ORPORATION NUAL REPORT  1998  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Division of Corporations |  | FILED   |   |   |            |
|-------------------------------|--|--|---|---|---|------------|
| DOCUI                         |  | 170000167  | dil.  |   | 98 OCT -5 AM 11: 24   |            |
| 1. Corporation                |  | theast, Inc  | 44  |   | SECRETARY OF STATE<br>TALLAHASSEE, FLORIDA  |            |
| Principal Piaco               | e of Businesis   | . Madir  |   |   |   |            |
|                               |  |  |   |   | DO NOT WRITE IN THIS SPACE  |            |
|                               |  |  |   |   | 3. Date Incorporated or Qualified  January 30, 1997   |            |
|                               | ace of Business  |  | aling Address                                 |   | 4. FEI Number Applied For   |            |
| 21 8\\ \\ Suite Apt #         | lagazo Runo  |  | ite Apt. #, etc.                              | an Historian G                          | \$0.75  | le         |
| 22                            | ·· <del>·</del>  | 27   | 420   |   | 5. Certificate of Status Desired \$8.75 Additional Fee Required   |            |
| City & State                  | LARGO FL   |  | ty & State  Outsin  T>                        | ,                                       | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees   |            |
| 710<br>24 3303                | 7 25 US  | 7y Zi  | ארגרק 3                                       | Country<br>OJA                          | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No   |            |
|                               | 9. Name and Addr   | ess of Current Register                                | ed Agent                                      | 81 Name                                 | 10. Name and Address of New Registered Agent  | _          |
|                               |  |  |   | 1 1                                     | Hamai Kut   |            |
|                               |  |  |   | 83                                      | t Address (P.O. Box Number is Not Acceptable)   | _          |
|                               |  |  |   |   |   |            |
|                               |  |  |   |   | KEY LANGO FL 85 ZID Code 33037  |            |
| 11. Pursuant to office or re- | o the provisions of Sec<br>q stered agent, a bot   | tions 607.0502 and 607.<br>h, in the State of Florida. | 1508, Florida Statutes<br>Such change was auf | the above-named<br>thorized by the corp | d corporation submits this statement for the purpose of changing its registere reporation's board of directors. I hereby accept the appointment as registered | ď          |
| agen: Lan<br>SIGNATURE        |  | soft me on gallons of So                               | omas J. BEN                                   | JTZ V.P.                                | 9/24/98   |            |
| 12.                           | Gra <mark>natu</mark> r (5 jin is 10 pro 16 ji rah<br>C  | OF HOLES AND DIRECTO                                   |   | Registered Agent signature              | OAL DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |            |
| Tiflef                        |  |  | DELFTE  | 1.1 101.4                               | PRESCOENT / PETECTOR Change Addition  | on i       |
| NA <b>M</b> E                 |  |  |   | 1.2 NAML                                | ROSS M POTTEN 5850 SAN FELERY MEON  |            |
| STRLET ADDRESS<br>CITY-ST-ZIP |  |  |   | 1.3 STREET ADDRESS<br>1.4 CHY+SL-ZIP    | HOURE TE 77057  |            |
| Tillef                        |  |  | DELETE  | 211111                                  | VP, / SECRETARY   PERECTOR   Change   Addition  | , T        |
| NAME<br>STREET ACTORESS       |  |  |   | 2.2 NAME<br>2.3 STREET ADDRESS          | MARK ROME<br>5850 Sau Felste B500   |            |
| CHY-ST Z#                     |  |  |   | 2 4 CHY+SI-7IP                          | 170470 Tx 77057   |            |
| TIFLE                         |  |  | DELETE  | 3 1 1111.1                              | V.P Commerces Change Addition   | n ·        |
| NAME<br>SUREET ADORESS        |  |  |   | 3.2 NAMI<br>3.3 STRUET ADDRESS          | THOMAS BINTL<br>16000 STEEDERN #420   |            |
| CHY-ST ZIP                    |  |  |   | 3.4. CITY - ST - ZIP                    | HOSTON TK 71579   |            |
| MILE<br>NAME                  |  |  | □ becete                                      | 4.1 TITLE<br>4.2 NAME                   | 4000025597043   | n          |
| STREET ADDRESS                |  |  |   | 4.3 STRELL ADDRESS                      | -10/08/9801 <b>0</b> 93015  |            |
| CHY-S' 70'                    |  |  | District                                      | 4.4 CHY-ST-7IP                          | ****550.00 ****550.00   | _          |
| NAME                          |  |  | □ DELETE                                      | 5.1 TITLE<br>5.2 NAME                   | 4000026597043   | n          |
| STREET ADOMESS                |  |  |   | 5.3 STREET ADDRESS                      | -10/08/9801 <b>0</b> 93016  |            |
| CHY-SE-ZIF                    |  |  | 🗖 онне  | 5.4 CHY: \$1: 70'<br>6.1 TOLE           | *******875 **********************************   |            |
| NAME                          |  |  | Con very te                                   | G 2 NAMI                                |   |            |
| STREET ADDRESS                |  |  |   | G 3 STREET ADDRESS                      | 1 40  | $/\!\!\!/$ |
| 14. Thereby ce                | ertify that the informatic   | on supplied with this filing                           | does not qualify for t                        | 64 CHY-S1-7#<br>the exemption state     | ed in Section 119.07(3)(i), Florida Statutes Hurther certify that the Avring to   |            |
| ind/cated o<br>officer or o   | in <b>this</b> armual report or<br>ire <b>cto</b> r of the corporate   | -suppler ental armual region or the receiver or trust  | ort is true and accura<br>ee empowered to exe | ale and that my sign                    | gnature shall have the same legal effect as if made under eath; thei Yam an<br>s required by Chapter 607, Fforida Statules; and that my name appears in       |            |
| SIGNATU                       |  | or on a rattachment with                               |   | J. BENT                                 | 2, V.P 9/24/98 281-370-6700   |            |
| SIGNITAL                      | ~ · · · · · · · · · · · · · · · · · · ·  |  |   |   | - 1 × 1 · · · · · · · · · · · · · · · · ·   | .          |

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P94000094296 (8)

BRINKLEY FAMILY CORPORATION, INC.

Mailing Address

FILED

98 OCT -5 PM 3: 48

SECRETARY OF STATE TALLAHASSEE. FLORIDA



| ROUTE 31. BO<br>TALLAHASSEE                      | FL 32312   | 215 S. MONROE STREET<br>SUITE 701<br>TALLAHASSEE FL 32301   |   | DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 12/30/1994  |  |
|--|--|---|---|--|--|
| <sub>1</sub>                                     | lace of Business   | 2a. Mailing Address   |   | 4. FEI Number  | Applied For                                |
| 21   |  | 26 Route 31, Box  | 156   | 59-3287766   | Not Applicable                             |
| Suite, Apt.                                      |  | Suite, Apt. #, etc.   |   | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required          |
| City & Stat                                      | e<br>  | City & State 28 Tallahassee, 1  | FL 32312  | Election Campaign Financing     Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees             |
| Zip  | Country  | Zip   | Country   | 8. This corporation owes or has paid the cur   | ent year i <u>nla</u> ngible               |
| 24   | 25   |   | o <i>USA</i>  | Personal Property Tax due June 30.   | Yes No                                     |
|  | 9, Name and Address of Curren  | t Registered Agent  |   | 10. Name and Address of New Registered   | Agent                                      |
|  | RFEL, TIMOTHY J  |   | 81 Name   |  |  |
|  | S. MONROE ST., SUITE 701   |   |   | dress (P.O. Box Number is Not Acceptable)  |  |
| TALL   | AHASSEE FL 32301   |   | 2120_   | Killarney Way  |  |
|  |  |   | 83  | •  |  |
|  |  |   | 84 City   |  | 85 Zip Code                                |
|  |  |   | 707.70  | hassee FL  | 32308                                      |
| 11. Pursuant<br>office or<br>agent. I a          | to the privisions of sections 607.050:<br>registered agent, or both, in the State<br>am familiar with, and accept the object | 2 and 607.1508, Florida Statutes,<br>of Florida/Such change was auti<br>ation of Pection 607.0505, Florid | the above-named corporat<br>horized by the corporat<br>la Statutes. | oration submits this statement for the purpose of chation's board of directors. I hereby accept the appoi  | anging its registered ntment as registered |
| SIGNATURE  | Signature, typed or prings hame of registered ager   | it and title if applicable. (NOTE   | : Registered Agent signature rec                                    | nuired when reinstation) DATE  | 110  |
| 12.  |  | D DIRECTORS   | 13.   | ADDITIONS/CHANGES TO OFFICERS AN   | D DIRECTORS IN 12                          |
| TITLE  | D  | DELETE  | 1.1 TITLE   |  | Change Addition                            |
| NAME   | BRINKLEY, ROBERT T III   | · · · · · · · · · · · · · · · · · · ·   | 1.2 NAME  | 8000026596   |  |
| STREET ADDRESS                                   | +548 SAN TORENZO 11222   | North Ocean Drue  | 1.3 STREET ADDRESS  | -10/08/380;  | ( <b>0</b> 93013                           |
| CITY-ST-ZIP                                      | CORAL GABLES FL 33146 LL   | ollyword Beach, Fr ,  | 1,4 CiTY-ST-ZIP   | ****550 <b>.</b> 00  | ****550.00                                 |
| TITLE  | D  | ollywood Beach, R. DELETE   | 2.1 TITLE   |  | Change Addition                            |
| NAME   | LAUDER, WILMA B  |   | 2.2 NAME  |  | Change [77] Monton                         |
| STREET ADDRESS                                   | ROUTE 31, BOX 156  |   | 2.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP                                      | TALLAHASSEE FL 32312   |   | 2.4 CITY-ST-ZIP   |  |  |
| TITLE  |  | DELETE  | 3.1 TITLE   |  | Change Addition                            |
| NAME   |  |   | 3.2 NAME  |  | ,.   |
| STREET ADDRESS                                   |  |   | 3.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP                                      |  |   | 3.4 CITY-ST-ZIP   |  |  |
| TITLE  |  | DELETE  | 4.1 TITLE   |  | Change Addition                            |
| NAME   |  | Francis .   | 4.2 NAME  | ·  | was a Cartenant                            |
| STREET ADDRESS                                   |  |   | 4.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP                                      |  |   | 4.4 CITY-ST-ZIP   |  |  |
| TITLE  |  | DELETE  | 5.1 TITLE   |  | Change Addition                            |
| NAME   |  |   | 5.2 NAME  | •  | •    |
| STREET ADDRESS                                   |  |   | 5.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP                                      |  |   | 5.4 CITY-ST-ZIP   |  |  |
| TITLE  |  | DELETE  | 6.1 TITLE   |  | Change Addition                            |
| NAME   |  | <u></u>   | 6.2 NAME  | •  |  |
| STREET ADDRESS                                   |  |   | 6.3 STREET ADDRESS  |  | 1 40 1                                     |
| CITY-ST-ZIP                                      |  |   | 6.4 CITY-ST-ZIP   |  |  |
| 14. I hereby ce<br>indicated of<br>an officer of | on this annual report or supplemental  | annual report is true and accurate<br>peiver or trustee empowered to ex                                   | exemption stated in sec<br>e and that my signature                  | ction 119.07(3)(i), Florida Statutes. I further certify te shall have the same legal effect as if made unde equired by Chapter 607, Florida Statutes; and that | roath; that I am                           |

CNI.O.

10/2/98

## WARFEL, GOLDBERG, DARIOTIS & WALDOCH, P.A.



ATTORNEYS AT LAW

PHONE: (850) 222-4000 FAX: (850) 906-0880 2120 KILLARNEY WAY TALLAHASSEE, FLORIDA 32308

POST OFFICE BOX 12458 TALLAHASSEE, FLORIDA 32317

STUART E. GOLDBERG\*
TERRENCE T. DARIOTIS
LAUCHLIN TENCH WALDOCH
CURTIS B. HUNTER

TIMOTHY J. WARFEL\*

• Florida Bar Certified Wills, Trusts & Estates

October 5, 1998

Division of Corporations
Annual Report/Reinstatement Section
Post Office Box 6327
Tallahassee, FL 32314-6327

Re: Brinkley Family Corporation, Inc.

Dear Sir/Madam:

Enclosed is the 1998 Annual Corporate Report for the above-referenced corporation and our client's check in the amount of \$550.00.

To the best of my knowledge, the above-referenced Corporation did not receive the Annual Report form or any subsequent notice until receipt of the Second Notice around September 18, 1998. This is particularly odd because we did receive a number of corporate annual reports which were timely filed with the Division of Corporations. The President of the Corporation was out of town unable to sign the Report until October 2, 1998.

In light of the above information, I am requesting that additional \$200 fee for filing after 9/30/98 be waived for this particular corporation.

Thank you for your consideration in this matter. If you have any questions, please let me know.

Timothy J. Warfel

TJW/lls

Enclosures have a service of the ser

E-CTIENTE/TOBI/BRINKBEIHTE/0298 682

BECHAED