**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**
**AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).**

# FILED
# Aug 26 1998 8:00am
# Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

## DOCUMENT # P97000034790

1. Corporation Name

FIRST BERMUDA CORPORATION, INC.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

| | |
|---|---|
| 2. Principal Place of Business: 21 449 10th Avenue West | 2a. Mailing Address: 26 P.O. Box 277 |
| Suite, Apt. #, etc.: 22 | Suite, Apt. #, etc.: 27 |
| City & State: 23 Palmetto, Florida | City & State: 28 Palmetto, Florida |
| Zip: 24 34221 — Country: 25 Manatee | Zip: 29 34221 — Country: 30 Manatee |

4. FEI Number: 65-0762171 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

**9. Name and Address of Current Registered Agent**

APPEL, STANLEY S.
1487 Second Street, Suite A
Sarasota, Florida 34236

**10. Name and Address of New Registered Agent**

81 Name: HARRISON, G. JOSEPH
82 Street Address (P.O. Box Number is Not Acceptable): 1206 Manatee Avenue West
83
84 City: Bradenton FL 85 Zip Code: 34205

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 G. Joseph Harrison 8/5/98
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 | President ☒ DELETE | 1.1 TITLE | Director/President ☒ Change ☐ Addition |
| NAME | Appel, Stanley S. | 1.2 NAME | Appel, Steven M. |
| STREET ADDRESS | 1487 Second Street, Suite A | 1.3 STREET ADDRESS | 6721 Virginia Crossing |
| CITY-ST-ZIP | Sarasota, Florida 34236 | 1.4 CITY-ST-ZIP | University Park, Florida 34201 |
| TITLE | Director ☒ DELETE | 2.1 TITLE | Director/Treasurer ☐ Change ☒ Addition |
| NAME | Weinberg, Ellen | 2.2 NAME | Appel, Christine |
| STREET ADDRESS | 4634 Little John Trail | 2.3 STREET ADDRESS | 6721 Virginia Crossing |
| CITY-ST-ZIP | Sarasota, Florida 34242 | 2.4 CITY-ST-ZIP | University Park, Florida 34201 |
| TITLE | ☐ DELETE | 3.1 TITLE | Director/Secretary ☒ Change ☐ Addition |
| NAME | | 3.2 NAME | Appel, Barbara B. |
| STREET ADDRESS | | 3.3 STREET ADDRESS | 8222 Regent Court |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | University Park, Florida 34201 |
| TITLE | ☐ DELETE | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| 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 | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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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.

**SIGNATURE:** 8/10/98 941-722-3267