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FILED
May 27 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 # P97000091357 (8)

1. Corporation Name
FPH MANAGEMENT, INC.



Principal Place of Business
450 E LAS OLAS BLVD. STE 1200
FT LAUDERDALE FL 33301

Mailing Address
450 E LAS OLAS BLVD. STE 1200
FT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/23/1997

4. FEI Number
65-0792649

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 SUITE 1400
23 City & State

26 Suite, Apt. #, etc.
27 SUITE 1400
28 City & State

24 Country
25

29 Zip
30 Country

9. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
ONE SE THIRD AVE, 28TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition
1.2 NAME RICHARD C. ROCHON
1.3 STREET ADDRESS 450 E. LAS OLAS BLVD., SUITE 1400
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

2.1 TITLE VP ☐ Change ☒ Addition
2.2 NAME WILLIAM M. PIERCE
2.3 STREET ADDRESS 450 E. LAS OLAS BLVD., SUITE 1400
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

3.1 TITLE T/VP ☐ Change ☒ Addition
3.2 NAME STEVEN M. DAURIA
3.3 STREET ADDRESS 450 E. LAS OLAS BLVD., SUITE 1400
3.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

4.1 TITLE S. / VP ☐ Change ☒ Addition
4.2 NAME RICHARD L. HANDLEY
4.3 STREET ADDRESS 450 E. LAS OLAS BLVD., SUITE 1400
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

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

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

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:

CR2E034 (10/97)