

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S13778 (3)

1. Corporation Name

MATTHEWS PROPERTIES, INC.



Principal Place of Business

Mailing Address

7289 BLUE SKIES DR.
APARTMENT 1601
SPRING HILL FL 34606
US

7289 BLUE SKIES DR.
SPRING HILL FL 34606
US

3. Date Incorporated or Qualified
11/19/1990

3a. Date of Last Report
01/17/1995

2. Principal Place of Business

21 9342 CLEARMEADOW LANE

2a. Mailing Address

26 9342 CLEARMEADOW LANE

4. FEI Number

NOT APPLICABLE

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

City & State

23 NEWPORT RICHEY FL

City & State

28 NEWPORT RICHEY FL

Zip

24 34655

Country

25 USA

Zip

29 34655

Country

30 USA

9. Name and Address of Current Registered Agent

MATTHEWS, DAVID L.
7289 BLUE SKIES DR.
SPRING HILL FL 34606

10. Name and Address of New Registered Agent

81 Name MATTHEWS, DAVID L.

82 Street Address (P.O. Box Number is Not Acceptable)
9342 CLEARMEADOW LANE

83

84 City NEWPORT RICHEY FL 85 Zip Code 34655

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

David L. Matthews

DAVID L. MATTHEWS

4/1/96

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME MATTHEWS, DAVID L.
STREET ADDRESS 7289 BLUE SKIES DR.
CITY-ST-ZIP SPRING HILL FL

TITLE D ☐ DELETE
NAME MATTHEWS, DAVID L.
STREET ADDRESS 9342 CLEARMEADOW LANE
CITY-ST-ZIP NEWPORT RICHEY FL 34655

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NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: DAVID L. MATTHEWS, *David L. Matthews*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96

813 372-2823

DATE

Telephone Number

CR2E034 (12/95)