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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S39335

(2)

ANDREW PROPERTY SERVICES, INC.

**FILED** 

Apr 25 1997 8:00am

Secretary of State

| Principal Place of Business Mailing Address |  |  |   |                 | 1 (49)1919 199 (1)19 10198 (1194 (1191 4119) 9711 (  | 14841 B1811 B1811 61614 B | 14841 A1811 (BA1   |  |
|---|--|--|---|-----------------|--|---------------------------|--------------------|--|
| 2015 DUDLEY PLACE<br>SARASOTA FL 34235      |  | 2015 DUDLEY PLACE<br>SARASOTA FL 34235-8                                   | 2015 DUDLEY PLACE<br>SARASOTA FL 34235-8941 |                 |  |                           |                    |  |
|   |  |  |   |                 | 3. Date Incorporated or Qualified 03/18/1991   | 3a. Date of La:           |                    |  |
| 2. Principal P                              | lace of Business   | 2a. Mailing Address  |   |                 | 4. FEI Number  | T Applied T of            |                    |  |
| 21  |  | 26   |   |                 | <b>65-0250466</b> Not Applicab   |                           |                    |  |
| Sulte, Apt.                                 | #, etc.  | Suite, Apt. #, etc.  |   |                 | 5. Certificate of Status Desired   | 1 1 7 7                   | 75 Additional      |  |
| 22  |  | 27   |   |                 |  | Fee                       | e Required         |  |
| City & State                                |  | City & State   |   |                 | 6. Election Campaign Financing   | and a second              |                    |  |
| 23  |  | 28   |   |                 | Trust Fund Contribution L. Added to Fees   |                           |                    |  |
| Zip   | Country Zip  |  | have any                                    |                 | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No |                           |                    |  |
| 24  | 25 29 29 Name and Address of Current Registered A                    |  | 30 ent                                      |                 | 10. Name and Address of New Registered Agent   |                           |                    |  |
| 440   | <del></del>  | outroit riogratorou rigorit  |   | 81 Name         | ID, Halle Bild Addition of Hotel Ho  | gistores Agein            |                    |  |
|   | REW, JEFFREY A   |  | ļ   |                 |  |                           |                    |  |
|   | DUDLEY PLACE   |  | 82 Street Add                               |                 | ddress (P.O. Box Number is Not Acceptable)   |                           |                    |  |
| SAH   | ASOTA FL 34235   |  | -   | 83              |  |                           |                    |  |
|   |  |  |   |                 |  |                           |                    |  |
|   |  |  |   | 84 City         |  | FL  85   7                | Zip Code           |  |
| 11. Pursuant                                | to the provisions of Sections  | 607.0502 and 607.1508. Florida St  | alutes, the ab                              | L<br>ove-named  | corporation submits this statement for the p   | urpose of changing        | na its registered  |  |
| office or r                                 | registered agent, or both, in the                                    | he State of Florida. Such change w   | as authorized                               | by the corp     | oration's board of directors. I hereby accep   | t the appointment         | t as registered    |  |
| _   |  | 1  | o, rionua otati                             | леь.            |  | _                         |                    |  |
| SIGNATURE                                   | grand, typer or printed name of reg                                  | Stored agent and title if applicable FRS AND DIRECTORS                     | (NOTE Registered                            | Agent signature | requireo when reinstating)   | 4-21-97<br>DATE           |                    |  |
| 12.   | OFFICI   | ERS AND DIRECTORS  | 13.   |                 | ADDITIONS/CHANGES TO OFFIC   | ERS AND DIRECT            | TORS IN 12         |  |
| TITLE                                       | D  | ☐ DELETE   | 1.1 1/1                                     | I.F             | 8  | 🔀 Chan                    | nge 🔲 Addition     |  |
| NAME  | ANDREW, JEFFREY A  |  | 1.2 NA                                      | MÉ              | seffery  |                           |                    |  |
| STREET ADDRESS                              | 2015 DUDLEY PLACE  |  | 1.3 \$1                                     | HEET ADDRESS    | ,  |                           |                    |  |
| CITY-ST-ZIP                                 | SARASOTA FL  |  | 1.4 011                                     | Y - ST - ZIP    |  |                           |                    |  |
| TITLE                                       | VP □ DELETE 2  |  | 2.1 1/1                                     | LE              | Change Addit   |                           | nge 🔲 Addition     |  |
| NAME  | SHAMBOUR, MARK J   |  | 2.2 NA                                      | ME              |  |                           |                    |  |
| STREET ADDRESS                              | 2015 DUDLEY PLACE  |  | 2.3 STREET ADDRESS                          |                 |  |                           |                    |  |
| CITY-ST-ZIP                                 | SARASOTA FL 34235  |  | 2. 4 CF                                     | TY-S1-ZIP       |  |                           |                    |  |
| TITLE                                       | ☐ DELETE   |  | 3.1 111                                     | LE              |  | Chan                      | nge Addition       |  |
| NAME  |  |  | 3.2 NA                                      | ME              |  |                           |                    |  |
| STREET ADDRESS                              |  |  | 3.3 \$10                                    | REET ADDRESS    |  |                           |                    |  |
| CITY-ST-ZIP                                 |  |  |   | 1Y - S1 - ZIP   |  |                           |                    |  |
| TITLE                                       |  | ☐ DELETE   | 4.1 TIT                                     | LE              |  | ☐ Chan                    | nge Addition       |  |
| NAME ·                                      |  |  | 4. 2 NA                                     | \M <del>{</del> |  |                           |                    |  |
| STREET ADDRESS                              |  |  | 4.3 \$1                                     | REE1 ADDRESS    |  |                           |                    |  |
| CITY-ST-ZIP                                 | <u> </u>   |  |   | Y-ST-ZIP        | <del></del>  |                           | T 2 12.            |  |
| TITLE                                       |  | ☐ DELETE   | 5.1 1(1                                     |                 |  | ☐ Chan                    | nge Addition       |  |
| NAME  |  |  | 5.2 NA                                      |                 |  |                           |                    |  |
| STREET ADDRESS                              |  |  |   | REET ADDRESS    |  |                           |                    |  |
| CITY-ST-ZIP                                 |  | T prieve   |   | Y-ST-ZIP        | <del></del>  | T 25                      | DDO Addition       |  |
| TITLE                                       |  | [_] DELETE   | 6.1 TIT                                     |                 |  | ∟_] Char                  | nge Addition       |  |
| NAME  |  |  | 6.2 NA                                      |                 |  |                           |                    |  |
| STREET ADDRESS                              |  |  |   | REET ADDRESS    |  |                           |                    |  |
| CITY-ST-ZIP                                 | b  | accomplished with this filter of the second                                |   | Y-ST-ZIP        | totad in Castion (10 07/0V) Finish Circles   | o I further next          | that the           |  |
| informatio                                  | on i <b>nd</b> icated on this annual re                              | port or supplemental annual report   | t is true and a                             | ccurate and     | tated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega          | il effect as if made      | e under oath; thai |  |
| l am an c                                   | officer or director of the corpo<br>in Block 12 or Block 13 الله cha | ration or the receiver or trustee em<br>inged, or on an attachment with an | powered to e<br>address                     | xecute this r   | eport as required by Chapter 607, Florida S  | talutes; and that r       | my name            |  |
| appears                                     | CHE OF BIOCK TE OF BIOCK   | inged, or on an attachment with an   | duoi baa                                    | ``              |  |                           |                    |  |