

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

94 AUG 12 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name PECK BROKERAGE, INC.	DOCUMENT # S97980 (4)
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Mailing Address 2125 WINDWARD WAY SUITE 200 VERO BEACH FL 32963	Principal Place of Business 2125 WINDWARD WAY SUITE 200 VERO BEACH FL 32963
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/03/1991	3a. Date of Last Report 03/08/1993
4. FEI Number 65-0299956	Applied For ☐ Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required ☐	6. Election Campaign Financing Trust Fund Contribution ☐
7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☒ Yes ☐ No	

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address 21 901 Bay Rd., Unit 101	2a. Principal Place of Business 25 901 Bay Rd., Unit 101
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	29 Country
25 Zip	30 Country

9. Name and Address of Current Registered Agent HUDSON, DOROTHY A. 2125 WINDWARD WAY SUITE 200 VERO BEACH FL 32963		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 or Sections 617.0502 and 617.1508, 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 or 617.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Change Registered Agent, Existing Agent Signature, and FEI Number) (New Registered Agent Signature) (Existing Agent Signature)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 1994	
1.1 TITLE	P/D	1.1 TITLE	
1.2 NAME	PECK, JOHN A.	1.2 NAME	
1.3 STREET ADDRESS	901 BAY ROAD, UNIT 101	1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	VERO BEACH FL	1.4 CITY, ST, ZIP	
2.1 TITLE	S/T/D	2.1 TITLE	
2.2 NAME	PECK, KEVIN	2.2 NAME	
2.3 STREET ADDRESS	47 SPRINGWOOD PATH	2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	LAUREL HOLLOW NY	2.4 CITY, ST, ZIP	
3.1 TITLE		3.1 TITLE	
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP		3.4 CITY, ST, ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP		4.4 CITY, ST, ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP		5.4 CITY, ST, ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.032(1)(b), Florida Statutes. I believe in the Division of Corporations from any liability of non-compliance with Section 193.032(1)(b) in the event that the information supplied is deemed exempt from public records. I further certify that the information submitted 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 have fulfilled all obligations concerning and imposed properly imposed by Chapter 217, Florida Statutes, that carry an effect on dissolution of this corporation or the removal or transfer of an officer or director from this report as required by Chapter 617 or Chapter 617, Florida Statutes, and that my name appears on Block 1, or Block 1, of change of officers and directors with an address.

SIGNATURE: John A. Peck Aug 8.94 in 37.3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR