## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Sep 19 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUÁL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 **DOCUMENT # V46506** SOUTHBROOKE DEVELOPMENT, INC. Mailing Address Principal Place of Business 11084 WILDLIFE TRAIL P.O. BOX 13991 TALLAHASSEE FL 32312 TALLAHASSEE FL 32317-3991 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 06/29/1992 01/19/1996 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For 2900 Industrial Plaza Blvd 59-3129759 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Tallahassee, Florida Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Tallahassee, Florida Added to Fees 28 Trust Fund Contribution Country Country 8. This corporation owes or has paid the current year Intangible 24 32301 25 U.S. ☐ Yes 29 30 Personal Property Tax due June 30. □ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DOWDY, DAVID W 81 Name 11084 WILDLIFE TRAIL 62 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32312 83 84 City Zip Code 85 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1,1 TITLE DOWDY, DAVID W 1.2 NAME NAME 11084 WILDLIFE TRAIL STREET ADDRESS 1.3 STREET ADDRESS **TALLAHASSEE FL 32312** 1,4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE JOHNSTON, THOMAS E NAME 2.2 NAME 6344 GLASGOW DRIVE STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 31 TITLE noilitbA ... TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE 4 1 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE 6.2 NAME DDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

reby 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 on 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 floer 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 Block 12 or Block 13 if changed, or on an attachment with an address.

FILED