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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortnam
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # **V54176**

(5)

1. Corporation LAURIE	Name A. BREWER-HATTS, INC.							
Principal Place of Business 1805 MAIN ST SUITE 912 SARASOTA FL 34236		Mailing Address 1605 MAIN ST SUITE 912 SARASOTA FL 34236						
					 Date Incorporated or Qualified 07/30/1992 		e of Last Re 5/01/19 9	•
2. Principal Plac	ce of Rusiness	2a. Mailing Address			4. FEI Number			Applied For
21		26		65-0348075		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75	Additional	
22		27		0. 00 modulo e control		Fee F	Required	
Oity & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23] Zip	Country	28	Country		This corporation has liability for	r introvible t		
24	25	29	30			s ∐No	TX DELOGE 3	130.032.,
	9. Name and Address of Currer	.	- 100		10. Name and Address of New	Registered	Agent	
			81	Name				
SCOVILL	, HAROLD W.		82	Street Add	lress (P.O. Box Number is Not Accepta	ible)		
1605 MA								
SUITE 9			83					
SARASO	TA FL 34236		84	City			85 Z ₁ ç	p Code
or registere familiar with	o the provisions of Sections 607.050/ ad agent, or both, in the State of Flor n, and accept the obligations of, Sec Splanze spaed or ported her enfrequenced agro-	ida. Such change was authori Iion 607.0505, Florida Statute	zed by the corp	oration's boa	vation submits this statement for the pard of directors. Thereby accept the ap	urpose of ch pointment as DATE	anging its r registered	egistered office agent. I am
12.		OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFIC				
TITLE	D DOGUED HAZZ A ANDRE A	☐ DELETE	1 1 TIFLE				Change	Addition
NAME	Brewer-Hatt, Laurie A. 1605 Main St #912		1.2 NAME	Libbooks				
STREET ADDRESS	SARASOTA FL			I ADDRESS				
CITY-ST-ZIP TITLE	ONNOONIL	[] DELETE	1 4 CITY - 2 1 TITLE	31 - 411	··		Change	Addition
NAME			2.2 NAME				_	
STREET ADORESS			2.3 STREE	FADDRESS				
CiTY-SI-ZIP			2.4 CITY -	S1 - ZIP				
TITLE		☐ DEFELE	3 1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS				T ADDRESS				
CHY-ST-ZIP		☐ DELETE	3.4 Cilit - 4 -1 Ti [†] LF	ST - ZiP			☐ Change	Addition
TITLE			4 11°UF 4.2 NAME				ondings	
NAME STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4.4 Cri Y -					
TITLE		☐ DELETE	5 1 TITLE	J. L.			☐ Change	Ado tien
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY	S1 21P				
TITLE		DELETE	6 1 THELE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			1	LADDRESS				
CITY-ST-ZIP	and 6, that the information are already	with this films is established if	64 City		for the exemption stated in Section 11	0.07(2)/U\ E	orida Statu	toe I further
certify that oath; that l	the information indicated on this and	iual report or supplemental an oration or the receiver or trust	inual report is tr lee empowered	ue and accur	nor the Basemphors safed in Section 11 are and final may signature shall have the nis report as required by Chapter 607,	ie sanie lega	l effect as il	f made under

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/16 (941)922-0554

CR2E034 (12/95)