FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V58204

(1)

COCHRAN BROTHERS, INC.

Principal Place of Business Mailing Address						OSON DIBN DIBN DIDN BIBN B	
1942 HILLSBOROUGH AVE. 1942 HILLSBOR TAMPA FL 33610 TAMPA FL 3361			OROUGH AVE.				
					3. Date incorporated or Qualified 08/14/1992	3a. Date of Last Re 02/23/1996	port
Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-3137316		plied For t Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 A	Additional
City & State		City & State	<u>- </u>		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	· ` -		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 [29]: 9. Name and Address of Current Registered Agent		30		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
CAR1	TER, DAVID R	on neglatores regain	81	Name	10, Mario and Madres of Hotel He	Julius Pigerii	
	US HIGHWAY 19			Street Add	ress (P.O. Box Number is Not Acceptab	اماد	
	PORT RICHEY FL 34652			Street Addi	rese (F.O. Dox Municipal is NOt Acceptab		
				3			
				City		85 Zip C	Code
-14 6		100 1007 4500 Fired Only		<u></u>		FL 85 Zip C	
office or re	to the provisions of Sections 607.00 egistered agent, or both, in the Sta	ite of Florida. Such change was	authoriz	ve-named corr by the corpora	coration submits this statement for the pation's board of directors. I hereby accept	or the appointment as i	registered
agent Lai	m tamiliar with, and accept the ob-	ligations of, Section 607.0505, F	lorida St	38.			
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (NC	TE: Register	sent signature regul	red when reinstating)	DATE	
12.		IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
THEE	D	DELETE	1.1 E			Change	Addition
NAME	COCHRAN, KEITH A		1.2	:			
STREET ADDRESS	1862 DAWN DR		1.3 l E	ET ADDRESS			
CITY ST-ZIP	CLEARWATER FL		1.41 %	ST-ZIP			- Addition
THILE	D COOLIDAN DEID (☐ DELETE	2.1 1 <u>.</u> ę			[] Change	Addition
NAME	COCHRAN, REID L		2.2 (A)	i l			
STREET ADDRESS	201 W LAUREL, #410 TAMPA FL			ET ADDRESS			
DITY-ST-ZIP TITLE	IAMPA FL	DELETE	2. 4 TY	- ST - ZIP		Change	Addition
NAME		□ btteit		1		Em orango	
STREET ADDRESS			3.2 (MI	ET ADORESS			
CITY-ST-ZIP							
THE		DELETE	4.1	-\$T-ZIP		Change	Addition
NAME			4. 2. AN				
STREET ADDRESS				ET ADDRESS			
CHY-SI-ZIP				- ST- ZIP			
TITLE		DELETE	5.1 LL			Change	Addition
NAME			5.2 M	E .			
STREET ADDRESS			5.3 HE	ET ADDRESS			
CITY - \$1 - 7/P	The state of the s		5.4 Y	-SY-ZIP			T Large
TITLE		☐ DELETE	61. U			L_ Change	Addition
NAME			6.2	E			
STREET ADDRESS			6.3	ET ADDRESS			
CITY-S1-ZIP	we could that the information	had with this filing does not - :-	6.4 Y	-\$1-2IP	ed in Section 119.07(3)(i), Florida Statute	e I further certify that	the
information Lamiari of	by certify that the information suppling indicated on this annual report of the corporation of the corporati	r supplemental annual report is or the recover or trustee empo	true and	and the	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as il made un	nger oath: that