

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V71164 (0)

1. Corporation Name

NEAL AUCTIONEERS, INC.



Principal Place of Business

Mailing Address

~~12721 ORANGE GROVE BLVD~~  
~~ROYAL PALM BEACH FL 33411~~  
US

~~12721 ORANGE GROVE BLVD~~  
~~ROYAL PALM BEACH FL 33411~~  
US

3. Date Incorporated or Qualified  
10/12/1992

3a. Date of Last Report  
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 200 BUSINESS PARKWAY  
Suite, Apt. #, etc.

26 200 BUSINESS PARKWAY  
Suite, Apt. #, etc.

22 SUITE E

27 SUITE E

23 ROYAL PALM BEACH, FL  
City & State

28 Royal Palm Beach, FL  
City & State

24 33411  
Zip Country

29 33411  
Zip Country

9. Name and Address of Current Registered Agent

4. FEI Number

65-0371769

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

NEAL, BRUCE

~~12721 ORANGE GROVE BLVD~~  
~~ROYAL PALM BEACH FL 33411~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

12201 WILLIAMS ROAD

83

84 City

FT. PIERCE

FL

85 Zip Code

34988-3015

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☐ DELETE

NAME NEAL, BRUCE D

STREET ADDRESS ~~12721 ORANGE GROVE BLVD~~

CITY-ST-ZIP ~~ROYAL PALM BEACH FL~~

TITLE DVS ☐ DELETE

NAME NEAL, LANETTE T.

STREET ADDRESS ~~12721 ORANGE GROVE BLVD~~

CITY-ST-ZIP ~~ROYAL PALM BEACH FL~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

12201 WILLIAMS ROAD  
FT. PIERCE, FL 34988-3015

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

12201 WILLIAMS ROAD  
FT. PIERCE, FL 34988-3015

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 I am an officer 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Lanette T Neal VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/96 407-790-2847

Date Daytime Phone

CR2E034 (12/95)