

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K42709 (1)

1. Corporation Name
1809 BRANDON, INC.

Principal Place of Business
**203 PROVIDENCE RD
BRANDON FL 33511
US**

Mailing Address
**203 PROVIDENCE RD
BRANDON FL 33511
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/01/1988** 3a. Date of Last Report **04/21/1994**

4. FEI Number **59-2919774** 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**

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**DUREIKO, JOSEPH
203 PROVIDENCE RD. OFFICE
BRANDON FL 33511**

10. Name and Address of New Registered Agent

81 Name **John Anderson**

82 Street Address (P.O. Box Number is Not Acceptable) **203 PROVIDENCE ROAD**

83

84 City **Brandon** FL 85 Zip Code **33511**

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]* **JOHN ANDERSON** DATE **4-20-95**

Signature, word or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE **P**

NAME **DUREIKO, JOSEPH**

STREET ADDRESS **28600 S.W. 132ND AVE.**

CITY - ST - ZIP **HOMESTEAD FL**

TITLE **S**

NAME **DUREIKO, ARLENE**

STREET ADDRESS **28600 S.W. 132ND AVE.**

CITY - ST - ZIP **HOMESTEAD FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** Change Addition

1.2 NAME **ANDERSON, JOHN**

1.3 STREET ADDRESS **203 PROVIDENCE RD.**

1.4 CITY - ST - ZIP **BRANDON FL 33511**

2.1 TITLE **S** Change Addition

2.2 NAME **JOANNE ANDERSON**

2.3 STREET ADDRESS **203 PROVIDENCE RD.**

2.4 CITY - ST - ZIP **BRANDON FL 33511**

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)(b), Florida Statutes. I further certify that the information indicated on the 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: *[Signature]* **JOHN ANDERSON** DATE **4-20-95** **6776120**

Signature and typed or printed name of signing officer or director Date