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Feb 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 477401 (4)
1. Corporation Name
JOHNSON, GILBERT & CAMPS, P.A.



Principal Place of Business: 1080 WOODCOCK ROAD SUITE 266 ORLANDO FL 32803
Mailing Address: 1080 WOODCOCK ROAD SUITE 266 ORLANDO FL 32803-3591

3. Date Incorporated or Qualified: 06/01/1975
3a. Date of Last Report: 02/27/1996
4. FEI Number: 59-1593905
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

2. Principal Place of Business
21 []
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country
2a. Mailing Address
26 []
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent
SIMMERMON, R.W.
1080 WOODCOCK ROAD
SUITE 266
ORLANDO FL 32803

10. Name and Address of New Registered Agent
81 Name: FRANK R. JOHNSON
82 Street Address (P.O. Box Number is Not Acceptable): 1080 Woodcock Road, Suite 266
83 Suite 266
84 City: Orlando
85 Zip Code: FL 32803

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] DATE: 1-21-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE: PSD
NAME: FRANK R. JOHNSON
STREET ADDRESS: 1080 WOODCOCK RD, SUITE 266
CITY-ST-ZIP: ORLANDO FL
[] DELETE
TITLE: T
NAME: CAMPS, RAFAEL
STREET ADDRESS: 1080 WOODCOCK RD., #266
CITY-ST-ZIP: ORLANDO FL
[X] DELETE
[] DELETE
[] DELETE
[] DELETE

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
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: [Signature] SIGNATURE REQUIRED DATE: 1/21/97 (407) 896-3880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CF2E034 (9/96)