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Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90093 013 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 601734

1. Corporation Name
SCOTT, ROYCE, HARRIS, BRYAN, BARRA & JORGENSEN, P.A.
 (Name change was filed with Florida Department of State on 03/17/99).

Principal Place of Business 4400 PGA BLVD STE 800 PALM BCH GARDENS FL 33410 US	Mailing Address 4400 PGA BLVD STE 800 PALM BEACH FL 33410 US
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 12/05/1969	
4. FEI Number 59-1280898	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

~~ROYCE, RAYMOND W~~
~~4400 PGA BOULEVARD, SUITE 800~~
~~PALM BCH. GDNS. FL 33410~~

10. Name and Address of New Registered Agent

81 Name Richard K. Barra
82 Street Address (P.O. Box Number is Not Acceptable) 4400 PGA Boulevard, Suite 800
83 City Palm Beach Gardens, FL
84 Zip Code FL 33410

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 **Richard K. Barra,** *Richard K. Barra* **03/31/99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE VSD	<input type="checkbox"/> DELETE
NAME HARRIS, JAMES R	
STREET ADDRESS 4400 PGA BOULEVARD, SUITE 800	
CITY-ST-ZIP PALM BCH. GDNS. FL 33410	
TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME ROYCE, RAYMOND W	
STREET ADDRESS 4400 PGA BOULEVARD, SUITE 800	
CITY-ST-ZIP PALM BCH. GDNS. FL 33410	
TITLE DVT	<input type="checkbox"/> DELETE
NAME BRYAN, JOHN L JR	
STREET ADDRESS 4400 PGA BOULEVARD SUITE 800	
CITY-ST-ZIP PALM BCH. GDNS. FL 33410	
TITLE DV	<input type="checkbox"/> DELETE
NAME BARRA, RICHARD K	
STREET ADDRESS 4400 PGA BOULEVARD, SUITE 800	
CITY-ST-ZIP PALM BCH GDNS. FL	
TITLE DV	<input type="checkbox"/> DELETE
NAME JORGENSEN, JOHN M	
STREET ADDRESS 4400 PAG BOULEVARD, SUITE 800	
CITY-ST-ZIP PALM BCH GDNS FL 33410	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME Barra, Richard K.	
4.3 STREET ADDRESS 4400 PGA Boulevard, Suite 800	
4.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *Richard K. Barra* **03/31/99** (561) 624-3900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)