

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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 AM 11:56

DOCUMENT # 619219 (9)

1. Corporation Name

SCOTT A. BRAUER, C.P.A., P.A.

Principal Place of Business

33 N. FT. HARRISON AVE.
CLEARWATER FL 34615

Mailing Address

33 N. FT. HARRISON AVE.
CLEARWATER FL 34615

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/01/1979

3a. Date of Last Report

01/27/1994

4. FEI Number

59-1908928

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

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

BRAUER, SCOTT A.
33 N. FT. HARRISON AVE.
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 must be printed name of registered agent and the filer's address)

(If filer is not the registered agent, signature required when filing this report)

12. OFFICERS AND DIRECTORS

12.1 TITLE

PST
BRAUER, SCOTT A.
740 S. FLA. AVE
TARPON SPRINGS FL

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

12.5

12.6

12.7

12.8

12.9

12.10

12.11

12.12

12.13

12.14

12.15

12.16

12.17

12.18

12.19

12.20

12.21

12.22

12.23

12.24

12.25

12.26

12.27

12.28

12.29

12.30

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5

13.6

13.7

13.8

13.9

13.10

13.11

13.12

13.13

13.14

13.15

13.16

13.17

13.18

13.19

13.20

13.21

13.22

13.23

13.24

13.25

13.26

13.27

13.28

13.29

13.30

14. I, the filer, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 113.07(2)(b), 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 1407, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

Scott A. Brauer

SCOTT A. BRAUER, CPA

(Signature and typed or printed name of signing officer or director)

1/10/95

(813) 446-7129

(Filer's Phone)