

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 MAR 24 AM 7:09

TALLAHASSEE, FLORIDA
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DOCUMENT # 619987 (1)

1. Corporation Name

FISHER/PALM BEACH, INC.

Principal Place of Business

1210 WEST 21ST STREET
RIVIERA BEACH FL 33404

Mailing Address

1210 WEST 21ST STREET
RIVIERA BEACH FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
05/07/1979	08/17/1994
4. FIC Number	Applied For
59-1911485	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contributions	
☐	
8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes	☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. 8901 Exchange Dr.
22. City & State	27. Suite, Apt. #, etc.
23. City & State	28. Orlando, FL
24. Zip	29. 32809
25. Country	30. USA

9. Name and Address of Current Registered Agent

STURGEON, BRIAN
7380 SAND LAKE RD.
SUITE 410
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81. Name	Wanda S. Evans
82. Street Address (P.O. Box Number is Not Acceptable)	8801 Exchange Dr
83. City	Orlando
84. State	FL
85. Zip Code	32809

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

SEE ATTACHED STATEMENT

Signature (typed or printed name of registered agent and the corporation)

(Typed Name of Agent, Agent, or Agent of Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD	TITLE	D/P
NAME	PIPPIN, M L	1. NAME	Tracy Lee Burr
STREET ADDRESS	7380 SAND LAKE RD., SUITE 410	1.1 STREET ADDRESS	15303 Dallas Parkway, #1250
CITY, ST, ZIP	ORLANDO FL 32819	1.4 CITY, ST, ZIP	Dallas, TX 75248
TITLE	D	2. TITLE	S/T
NAME	JOHNSON, RICHARD P	2.1 NAME	Wanda S. Evans
STREET ADDRESS	7380 SAND LAKE RD., SUITE 410	2.1 STREET ADDRESS	8801 Exchange Dr.
CITY, ST, ZIP	ORLANDO FL 32819	2.4 CITY, ST, ZIP	Orlando, FL 32809
TITLE	V	3. TITLE	Asst. Sec.
NAME	HALVERSON, STEVE	3.1 NAME	Bernadette M. Kruek
STREET ADDRESS	7380 SAND LAKE RD., SUITE 410	3.1 STREET ADDRESS	15303 Dallas Parkway, #250
CITY, ST, ZIP	ORLANDO FL 32819	3.4 CITY, ST, ZIP	Dallas, TX 75248
TITLE	T	4. TITLE	
NAME	STURGEON, BRIAN	4.1 NAME	
STREET ADDRESS	7380 SAND LAKE RD., SUITE 410	4.1 STREET ADDRESS	
CITY, ST, ZIP	ORLANDO FL 32819	4.4 CITY, ST, ZIP	
TITLE	S	5. TITLE	
NAME	ALPERS, JOHN	5.1 NAME	
STREET ADDRESS	7380 SAND LAKE RD., SUITE 410	5.1 STREET ADDRESS	
CITY, ST, ZIP	ORLANDO FL 32819	5.4 CITY, ST, ZIP	
TITLE		6. TITLE	
NAME		6.1 NAME	
STREET ADDRESS		6.1 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

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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 193.032, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my corporation shall have the same kept on file in its records. I am an officer or director of the corporation or the owner or franchisee 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: Bernadette M. Kruek Bernadette M. Kruek

3/14/95

214-387-2394