

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **630022** (2)
1. Corporation Name
ALEXANDER G. PADEREWSKI, P.A.



Principal Place of Business: **1834 MAIN STREET SARASOTA FL 34236**
Mailing Address: **1834 MAIN STREET SARASOTA FL 34236**

3. Date Incorporated or Qualified: **07/19/1979**
3a. Date of Last Report: **01/20/1995**
4. FEI Number: **59-1925035**
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 State, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
2a. Mailing Address
26 State, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent
**PADEREWSKI, ALEXANDER G
1834 MAIN ST.
SARASOTA FL 34236**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS
1. DP PADEREWSKI, ALEXANDER G 1834 MAIN ST. SARASOTA FL
2. DELETE
3. DELETE
4. DELETE
5. DELETE
6. DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. 1. TITLE Change Addition
2. 2. NAME
3. 3. STREET ADDRESS
4. 4. CITY - ST - ZIP
5. 5. TITLE Change Addition
6. 6. NAME
7. 7. STREET ADDRESS
8. 8. CITY - ST - ZIP
9. 9. TITLE Change Addition
10. 10. NAME
11. 11. STREET ADDRESS
12. 12. CITY - ST - ZIP
13. 13. TITLE Change Addition
14. 14. NAME
15. 15. STREET ADDRESS
16. 16. CITY - ST - ZIP
17. 17. TITLE Change Addition
18. 18. NAME
19. 19. STREET ADDRESS
20. 20. 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)(k), 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: _____ DATE: **2/5/96** (813)-365150
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)