

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **670872** (1)
1. Corporation Name
HURD, HORVATH & DINKIN, P.A.



Principal Place of Business 8295 N MILITARY TRAIL STE A PALM BCH GARDENS FL 33410	Mailing Address 8295 N MILITARY TRAIL STE A PALM BCH GARDENS FL 33410
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 05/20/1980	
24		29		4. FEI Number 59-2001435	
25		30		Applied For Not Applicable	
26		31		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
27		32		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
28		33		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

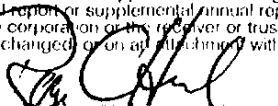
9. Name and Address of Current Registered Agent HURD, ROGER C. 8295 N MILITARY TRAIL, STE A PALM BCH GARDENS FL 33410				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
85				FL 85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE ☐ DELETE				1.1 TITLE ☐ Change ☐ Addition			
1.2 NAME HURD, ROGER C.				1.2 NAME			
1.3 STREET ADDRESS 1163 RAINWOOD CIRCLE				1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP PALM BEACH GARDENS FL				1.4 CITY-ST-ZIP			
2.1 TITLE ☐ DELETE				2.1 TITLE ☐ Change ☐ Addition			
2.2 NAME				2.2 NAME			
2.3 STREET ADDRESS				2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP				2.4 CITY-ST-ZIP			
3.1 TITLE ☐ DELETE				3.1 TITLE ☐ Change ☐ Addition			
3.2 NAME				3.2 NAME			
3.3 STREET ADDRESS				3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP				3.4 CITY-ST-ZIP			
4.1 TITLE ☐ DELETE				4.1 TITLE ☐ Change ☐ Addition			
4.2 NAME				4.2 NAME			
4.3 STREET ADDRESS				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
5.1 TITLE ☐ DELETE				5.1 TITLE ☐ Change ☐ Addition			
5.2 NAME				5.2 NAME			
5.3 STREET ADDRESS				5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP				5.4 CITY-ST-ZIP			
6.1 TITLE ☐ DELETE				6.1 TITLE ☐ Change ☐ Addition			
6.2 NAME				6.2 NAME			
6.3 STREET ADDRESS				6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP				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.

SIGNATURE:  **ROGER C. HURD PRES** 2/6/98 561 627-1534

CR2E034 (10/97)