

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 26 PM 1:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 738139 (5)

1. Corporation Name

SOUTHERN LEGAL COUNSEL, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
115A NE. 7TH AVE. GAINESVILLE FL 32601	115-A NE. 7TH AVE. GAINESVILLE FL 32601

3. Date Incorporated or Qualified 02/17/1977	3a. Date of Last Report 02/23/1994
4. FEI Number 59-1726382	Applied For <input 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under G. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 1229 NW 12 Avenue	26 1229 NW 12 Avenue
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Gainesville, FL	28 City & State Gainesville, FL
24 Zip 32601-4113	25 Country Alachua
29 Zip 32601-4113	30 Country Alachua

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
NELSON, ALICE K. 115-A NE 7TH AVENUE GAINESVILLE FL 32601-1391		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1229 NW 12 Avenue 83 84 City Gainesville	
		85 Zip Code FL 32601	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 **ALICE K. NELSON** **President/Treasurer** **4/21/95**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS	
TITLE	C
NAME	HARRISON, LOIS
STREET ADDRESS	2311 NEVADA RD.
CITY-ST-ZIP	LAKELAND FL
TITLE	PT
NAME	NELSON, ALICE K.
STREET ADDRESS	115-A N.E. 7TH AVENUE
CITY-ST-ZIP	GAINESVILLE FL
TITLE	SD
NAME	HADEED, ALBERT J.
STREET ADDRESS	1200 EAST MOODY BLVD. #1
CITY-ST-ZIP	BUNNELL FL
TITLE	D
NAME	MCINTOSH, MICHAEL
STREET ADDRESS	215 FIFTH STREET, #100
CITY-ST-ZIP	WEST PALM BEACH FL
TITLE	D
NAME	PETREY, RODERICK N.
STREET ADDRESS	1200 BRICKELL AVE.
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	D'ALEMBERTE, TALBOT
STREET ADDRESS	215 SOUTH MONROE STREET, SUITE 601
CITY-ST-ZIP	TALLAHASSEE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HARRISON, LOIS
1.3 STREET ADDRESS	2311 Nevada Road
1.4 CITY-ST-ZIP	Lakeland, FL 33803
2.1 TITLE	PT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	NELSON, ALICE K.
2.3 STREET ADDRESS	1229 NW 12 Avenue
2.4 CITY-ST-ZIP	Gainesville, FL 32601-4113
3.1 TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	HADEED, ALBERT J.
3.3 STREET ADDRESS	4 Ocean Vista Lane
3.4 CITY-ST-ZIP	Palm Coast, FL 32137
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	MCINTOSH, MICHAEL
4.3 STREET ADDRESS	16 Kalorama Circle NW
4.4 CITY-ST-ZIP	Washington, D.C. 20008
5.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	PETREY, RODERICK N.
5.3 STREET ADDRESS	1200 Brickell Avenue
5.4 CITY-ST-ZIP	Miami, FL 33101
6.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	D'ALEMBERTE, TALBOT
6.3 STREET ADDRESS	211 Westcott Building
6.4 CITY-ST-ZIP	Tallahassee, FL 32306-1037

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 110.07(3)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Alice K. Nelson* **ALICE K. NELSON, President/Treasurer** **04/21/95** **904/955-2144**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

738139

**Division of Corporations
1995 Annual Report (attachment)**

**Southern Legal Counsel, Inc.
Document #738139 (5)**

6. Names and Street Addresses of Each Officer and Director

<u>Title</u>	<u>Names</u>	<u>Street Address</u>	<u>City/State</u>
7. D	Marilyn Holifield	1200 Brickell Avenue	Miami, FL
8. D	Wm. Reece Smith, Jr.	One Harbour Place	Tampa, FL