

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:35

DOCUMENT # F93000001153 (6)

1. Corporation Name
FORENSIC CONSULTANTS, INC.

Principal Place of Business Mailing Address
2901 SHANNON CIR 2901 SHANNON CIR
PALM HARBOR FL 34684 PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/19/1993** 3a. Date of Last Report **05/01/1994**

2. Principal Place of Business 2a. Mailing Address
21 28
22 State, Apt. #, etc. 27
23 City & State 28
24 Zip 25 Country 29 Zip 30 Country

4. FEI Number **51-0298278** 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. 193.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFE, LARRY
200 A JOHN KNOW ROAD
TALLAHASSEE FL 32314-6643

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 its principal 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 of person named in 9 and the filer)

(Signature of Registered Agent to future reports when applicable)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY, ST, ZIP
PC **O'NEILL, ROBERT**
2901 SHANNON CIR
PALM HARBOR FL 34684
TITLE NAME STREET ADDRESS CITY, ST, ZIP
V **RIES, WILLIAM**
7710 MILLER COURT
PENNSAUKEN NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
21 TITLE Change Addition
22 NAME **NO LONGER**
23 STREET ADDRESS **AN OFFICER**
24 CITY, ST, ZIP
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I hereby certify that the information included with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information included 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. I am president or director of the corporation or the receiver or trustee empowered to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Robert O'Neill* (Print) **34-95 (S-13) 789 0991**
DATE: _____