

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 07 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # H10733 (4)

1. Corporation Name ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, INC.



Principal Place of Business: 2033 MAIN ST. STE 600 SARASOTA FL 34237
 Mailing Address: 2033 MAIN ST. STE 600 SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: 07/03/1984
 4. FEI Number: 59-2552799
 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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent: HOPKINS, F THOMAS III, 2033 MAIN ST, SUITE 600, SARASOTA FL 34237

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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	
TITLE: CD	FUREN, MICHAEL J. 33 SANDY COVE RD. SARASOTA FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PD	BARTLETT, CHARLES J. 5147 OXFORD DR. SARASOTA FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DT	MYERS, TROY H. 5111 RIVERVIEW BLVD. BRADENTON FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DVP	FOREMAN, MICHAEL L. 2033 MAIN ST., STE 600 SARASOTA FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DVP	PFLUGNER, J. GEOFFREY 2033 MAIN ST., STE 600 SARASOTA FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DT	HOPKINS, F. THOMAS 2033 MAIN ST., STE 600 SARASOTA FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____ 9/1-9/10/98 941-366-8100

CR2E034 (5/98)