2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State
09-03-2002 90002 039 ***550.00

DOCUMENT # J06267

1. Entity Name
CORRY, AKER, EDINGER, JONES & FISHER, P.A. ✓

Principal Place of Business	Mailing Address
250 HWY 77 PANAMA CITY FL 32405	250 HWY 77 PANAMA CITY FL 32405

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2500 HIGHWAY 77	2500 HIGHWAY 77
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PANAMA CITY FL	City & State: PANAMA CITY FL
Zip: 32405 Country:	Zip: 32405 Country:

4. FEI Number 59-2657206 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORRY, JAMES E., JR. 2500 HIGHWAY 77 PANAMA CITY FL 32405	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

*SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 13, 2002 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORRY, JAMES E., JR. 90 KENTUCKY AVE. LYNN HAVEN FL	☐ Delete	DOCTOR BRET L. FISHER 224 S. COVE LANE PANAMA CITY, FL 32401	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST AKER, ANTHONY L. 1911 TYNDALL DR PANAMA CITY FL	☐ Delete	DOCTOR MARK S. JONES 310 SUMMERWOOD DRIVE PANAMA CITY BEACH, FL 32413	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDINGER, DAVID J. 4500 CRESTBROOK PANAMA CITY FL	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E034 (4/02)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 8/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #