

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

APPROVED AND FILED

96 JAN 24 11:11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J95491 (3)**
1. Corporation Name
DEVINE AND ASSOCIATES, INC.



Principal Place of Business: **119 HICKORY CREEK BLVD. BRANDON FL 33511 US**
Mailing Address: **P.O. BOX 620 TAMPA FL 33601 US**

3. Date Incorporated or Qualified: **10/01/1987** 3a. Date of Last Report: **01/24/1995**
4. FEI Number: **59-2848532** 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. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **903 Arrowhead Lane** 2a. Mailing Address: **SAME AS ABOVE**
21. **Brandon** 26. **(NO change)**
22. **Brandon, FL** 27. **(NO change)**
23. **33511** 28. **33511**
24. **US** 29. **US** 30. **US**

9. Name and Address of Current Registered Agent
**DEVINE, B. MACK
119 HICKORY CREEK BLVD
BRANDON FL 33511**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable): **903 Arrowhead Lane**
83. **Brandon**
84. City: **Brandon** 85. State: **FL** 86. Zip Code: **33511**

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: *[Signature]* DATE: **1-17-95**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	DEVINE, B. MACK	
STREET ADDRESS	119 HICKORY CREEK BLVD	
CITY-ST-ZIP	BRANDON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	Director, Chairman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	Devine, B. Mack	
1 3 STREET ADDRESS	903 Arrowhead Lane	
1 4 CITY-ST-ZIP	Brandon, FL 33511	
2 1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME		
2 3 STREET ADDRESS		
2 4 CITY-ST-ZIP		
3 1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME		
3 3 STREET ADDRESS		
3 4 CITY-ST-ZIP		
4 1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME		
4 3 STREET ADDRESS		
4 4 CITY-ST-ZIP		
5 1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY-ST-ZIP		
6 1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY-ST-ZIP		

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 119.07(3)(k), 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: *[Signature]* DATE: **1-17-95** (813) 664-3209
Signature and typed or printed name of signing officer or director. Daytime Phone #

CR2E034 (12/95)