

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L34280** (2)

1. Corporation Name

BARWICK, BLAKISTON & WISNESKI, P.A.



Principal Place of Business: **% HENRY Y. BLAKISTON, 1001 N. U.S. HIGHWAY ONE, SUITE 600, JUPITER FL 33477**

Mailing Address: **% HENRY Y. BLAKISTON, 1001 N. U.S. HIGHWAY ONE, SUITE 600, JUPITER FL 33477**

3. Date Incorporated or Qualified: **12/04/1989**

3a. Date of Last Report: **02/01/1995**

4. FEI Number: **65-0151794**

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 (21-23)

2a. Mailing Address (26-28)

24-25: Zip, Country

29-30: Zip, Country

9. Name and Address of Current Registered Agent

**BLAKISTON, HENRY Y.
 1001 N. U.S. HIGHWAY ONE
 SUITE 600
 JUPITER FL 33477**

10. Name and Address of New Registered Agent

81 Name: **RONALD H. WISNESKI**

82 Street Address (P.O. Box Number is Not Acceptable): **SAME**

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 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: **RONALD H. WISNESKI** (Typed name) *[Signature]* (Printed name)
 Date: **3/24/96**

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BARWICK, STEVEN R.	
STREET ADDRESS	19570 TRAILS END TERR.	
CITY-ST-ZIP	JUPITER FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WISNESKI, RONALD H.	
STREET ADDRESS	18586 LAKESIDE GARDEN DRIVE	
CITY-ST-ZIP	JUPITER 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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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 checked="" type="checkbox"/> Addition
3.2 NAME	DIRECTOR
3.3 STREET ADDRESS	HENRY Y. BLAKISTON
3.4 CITY-ST-ZIP	1001 N. U.S. HWY ONE STE 600
	JUPITER FL 33477
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	700001774307
6.3 STREET ADDRESS	-04/09/96--01116--010
6.4 CITY-ST-ZIP	***200.00

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]* (Typed name) *[Signature]* (Printed name)
 Date: **4/5/96**
 Telephone: **407 747 2772**

CR2E034 (12/95)