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FILED
Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L93729

(6)

1. Corporation Name
J. D. ALLEN & ASSOCIATES, INC.



Principal Place of Business
267 AIRPORT ROAD, SOUTH
NAPLES FL 33942
US

Mailing Address
267 AIRPORT ROAD, SOUTH
NAPLES FL 34104-3518
US

3. Date Incorporated or Qualified
08/15/1990

3a. Date of Last Report
04/05/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

61-1040273

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN, JAMES D., JR.
267 AIRPORT ROAD, SOUTH
NAPLES FL 33942

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 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP

NAME BUCKLER, EDWARD F. JR.
STREET ADDRESS 163 CONNERS AVENUE
CITY-ST-ZIP NAPLES FL

DELETE

1.1 TITLE

Change Addition

TITLE PS

NAME ALLEN, JAMES D., JR.
STREET ADDRESS 267 AIRPORT RD., SOUTH
CITY-ST-ZIP NAPLES FL

DELETE

2.1 TITLE

Change Addition

TITLE T

NAME BUCKLER, NANCY Y
STREET ADDRESS 163 CONNERS AVE
CITY-ST-ZIP NAPLES FL

DELETE

3.1 TITLE

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

4.1 TITLE

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

5.1 TITLE

Change Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

6.1 TITLE

Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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

[Signature]

[Signature]

941-

680-4400

CR2E034 (9/96)