

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

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-04/02/96--01121--010
***61.25

DOCUMENT # N95000000143 (6)

1. Corporation Name

DANIEL WEBSTER PERKINS BAR ASSOCIATION, INC.



Principal Place of Business

Mailing Address

100 RIVERSIDE AVE.
JACKSONVILLE FL 32202

100 RIVERSIDE AVE.
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified
01/01/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-3289101

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

**LAWRENCE, NOEL G ESQ.
100 RIVERSIDE AVE.
JACKSONVILLE FL 32202**

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 617.0502 and 617.1508, 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 617.0503, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	LAWRENCE, NOEL G	100 RIVERSIDE AVE.	JACKSONVILLE FL 32202	<input type="checkbox"/>
D	CLAYTON, KIMBERLY	111 COASTLINE DR. EAST, S-616	JACKSONVILLE FL 32202	<input type="checkbox"/>
SD	BASS, LESTER	1103 LAURA ST. NORTH	JACKSONVILLE FL 32206	<input type="checkbox"/>
TD	COASTES, CHARLOTTE	604 HOGAN ST	JACKSONVILLE FL 32202	<input type="checkbox"/>
D	SCHROTH, DEBORAH	604 HOGAN ST	JACKSONVILLE FL 32202	<input type="checkbox"/>
D	ROLLE, WADE M	4730 NORWOOD AVE	JACKSONVILLE FL 32206	<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
President	Kim Clayton	921 North Davis Street, Bldg B	Jacksonville, FL 32209-6821	<input checked="" type="checkbox"/>
Vice President	Craig A. Gibbs	214 E. Ashley Street	Jacksonville, FL 32202	<input checked="" type="checkbox"/>
SD	REGINALD Luster	200-700 West Forsyth Street	Jacksonville, FL 32202	<input checked="" type="checkbox"/>
TD	Don Robinson	411 East Monroe Street	Jacksonville, FL 32202	<input checked="" type="checkbox"/>
D	Grayling Brannon	1543 Kingsley Avenue 18-B	Orange Park, FL 32073	<input checked="" type="checkbox"/>
D AD	Noel G. Lawrence	100 Riverside Avenue	Jacksonville, FL 32202	<input checked="" type="checkbox"/>

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Noel G. Lawrence
Director
Administrative Officer
Date: **2/5/96**
Daytime Phone #: **904 356 9928**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)