FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 FEB 27 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000078425 (4)**

1. Corporation Name
JOHN A. BOND, P.A.

Principal Place of Business	Mailing Address
701 PROMENADE DR SUITE 200 PEMBROKE PINES FL 33025	701 PROMENADE DR SUITE 200 PEMBROKE PINES FL 33025

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/12/1993**
3a. Date of Last Report: **03/18/1994**

2. Principal Place of Business
21:

2a. Mailing Address
26: 1085 SE 6th Ave.

Suite, Apt. #, etc.
22:

Suite, Apt. #, etc.
27:

City & State
23:

City & State
28: Dania, Fl

Zip / Country
24: / 25:

Zip / Country
29: 33004 / 30: USA

4. FEI Number: **65-0459849** ☐ 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

BOND, JOHN A
701 PROMENADE DR
SUITE 200
PEMBROKE PINES FL 33025

10. Name and Address of New Registered Agent

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] John A. Bond 2/21/95
(Name of person signing) (Date) (Registered Agent's signature required for reinstatement)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVST	11 TITLE	☐ Change ☐ Addition
NAME	BOND, JOHN A	12 NAME	
STREET ADDRESS	1085 S.E. 6TH AVE.	13 STREET ADDRESS	
CITY ST ZIP	DANIA FL	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	BOND, JOHN A	22 NAME	
STREET ADDRESS	1085 S.E. 6TH AVE.	23 STREET ADDRESS	
CITY ST ZIP	DANIA FL	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is true and accurate and that my electronic 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] Pr. John A. Bond, Pres. 2/21/95 305 429-0007
SIGNATURE(S) AND TITLE(S) OR PRINTED NAME(S) OF SIGNING OFFICER OR DIRECTOR

0084706 CP