

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000032939 (8)**

1. Corporation Name  
**PERSHING, INC.**



Principal Place of Business  
**7520 BILTMORE DR  
SARASOTA FL 34231**

Mailing Address  
**7520 BILTMORE DR  
SARASOTA FL 34231**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 State, Apt. #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

**PERSHING, KENT  
7520 BILTMORE DR  
SARASOTA FL 34231**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified  
**04/29/1994**

3a. Date of Last Report  
**05/01/1995**

4. FEI Number  
**65-0482464**

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

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.01(2) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. Such change was a change of the corporation's principal office. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.01(2) Florida Statutes.

SIGNATURE

Signature of representative of the corporation

Signature of representative of the corporation

IAA

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME **P PERSHING, KENT**  
STREET ADDRESS **7520 BILTMORE DRIVE**  
CITY-ST-ZIP **SARASOTA FL**

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE  DELETE  
NAME **V PERSHING, ELAINE**  
STREET ADDRESS **7520 BILTMORE DRIVE**  
CITY-ST-ZIP **SARASOTA FL**

15 TITLE  Change  Addition  
16 NAME  
17 STREET ADDRESS  
18 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

19 TITLE  Change  Addition  
20 NAME  
21 STREET ADDRESS  
22 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

23 TITLE  Change  Addition  
24 NAME  
25 STREET ADDRESS  
26 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

27 TITLE  Change  Addition  
28 NAME  
29 STREET ADDRESS  
30 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 trustee 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 checked, on an attachment with annual fees.

SIGNATURE: *Kent Pershing*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Kent Pershing, Pres.**

*4-8-96*

**371-2431**

CR2E034 (12/95)